

Please return by email, fax, mail or drop-off in person to:

Big Brothers Big Sisters of Prince George
777 Kinsmen Place, Prince George, BC V2M 6Y7
Phone: 250-563-7410 Fax: 250-564-5217

Email: reception@bbbspge.ca Additional info on our website: www.bbbspge.ca

Date completed: _____ Date received: _____

This application form is to be completed by the youth/child's parent or guardian. Once the application is complete, please contact our office to arrange for an in-person parent/guardian interview (without your child) to discuss your youth/child application further.

Please bring the completed application and a recent photo of the youth/child with you to the parent/guardian interview.

Personal Information			
Youth/Child Name:		Health Care #:	
Date of Birth:		Age:	
Adult Information			
Name of Referring Parent/Guardian:		Relationship:	
Mailing Address:		Postal Code:	
Phone:		Other Phone:	
E-Mail:			
Employment Information			
Employer:		Occupation:	
Can we contact you at work?	Yes <input type="radio"/> No <input type="radio"/>	Work Phone:	
Emergency Contact Information			
Name:		Phone:	
Relationship:		Work Phone:	

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About your Youth/Child

1. Have you talked about Big Brothers Big Sisters with your child?
2. Is there anything about the family or child's history that we should know?
3. Does your child spend part or all of the summer out of town?

b. If yes, please explain

4. Why do you feel that your child would benefit from a Big Brother or Big Sister?

The answers that you have given will help us provide the best possible Big Brother/Big Sister for your child. Please be sure to advise us of any changes in your home situation such as: **address changes, phone number changes, marriage, etc.**

I _____ give permission for the assignment of a suitable Big Brother Big Sister
(name of parent of guardian)

to my child, _____.
(Child's name)

Signature: _____ Date: _____

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I acknowledge and accept that this application does not guarantee my child will be accepted into this program. Big Brothers Big Sisters of Prince George is under no obligation to provide my child with a Mentor and is not obligated to provide a reason.

I understand that this application and subsequent information on my child's file is the property of Big Brothers Big Sisters of Prince George and if the agency closes; then my child's complete file becomes the property of Big Brothers Big Sisters of Canada. I also understand that the information on this file will be retained for a period of 75 years after the closure of my child's final match.

Big Brothers Big Sisters of Prince George requires your consent to display photos of your child for recruitment or Public Relation events. Their photos could be used in our agency's promotional videos, advertising, in our newsletter, brochures, pamphlets, on our website, or in the newspaper.

If you do NOT consent please initial here: _____

As the parent/guardian of this minor, I hereby release and forever discharge Big Brothers Big Sisters of Prince George, Big Brothers Big Sisters of Canada and their respective employees, directors, and mentors, from any cause of action or claim of damages, whether bodily injury, property damage, emotional trauma, anxiety or distress arising from the association of said minor, with Big Brothers Big Sisters of Prince George. The implications of this waiver are clear to me and I have had the opportunity to seek clarification. I understand and consent to this waiver and agree that it and my application have been made of my own free will and without duress.

PRINTED NAME OF PARENT: _____

Signature of Parent: _____

Date: _____