## 2021 – 2022 AWANA REGISTRATION FORM

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Parent(s)/Guardian:			
Address:			
Phone:///	Phone:	/	_/
Email:			
Emergency Contact:	Phone:	/	/
Home Church:			
Were you brought by a friend? If so, who?			

## **CHILD/CHILDREN INFORMATION**

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CUBBIES (3 & 4yr old)	Allergies?					
Name:		M / F	Age:	Birthdate:	]	_/
Name:		M / F	Age:	Birthdate:	]	_/
SPARKS (K, 1 <sup>st</sup> , 2 <sup>nd</sup> grade)	Allergies?					
Name:		M / F	Age:	Birthdate:	]	_/
Name:		M / F	Age:	Birthdate:	]	_/
<b>T&amp;T BOYS &amp; GIRLS</b> (3 <sup>rd</sup> – 6 <sup>th</sup> grade)	Allergies?					
Name:		M / F	Age:	Birthdate:	]	_/
Name:		M / F	Age:	Birthdate:	]	_/

**Terms and Conditions:** 

 I understand that my child/children may participate in physical activities such as those held during Game Time. As with any other physical activity, there is a risk of injury. I fully accept this risk and hold harmless from any legal liability, Celebration Baptist Church and any persons involved in the AWANA Club Ministry.
In the event of an emergency that requires medical treatment for the above named child/children, I understand every effort will be made to contact me or my emergency contact. However, if I/we cannot be reached, I give my permission to the AWANA volunteers to secure the services of a licensed physician to provide the care necessary for my child's well being. I assume responsibility for all costs connected to any accident or treatment of my child.

3) I grant permission for a photo of my child to appear in an unpublished club directory to be used by AWANA Leaders only. I also give permission for photo(s) of my child to appear among other general club photos as long as there is no identifying information shown.

4) I grant permission for my child to travel to/from AWANA Club events with an adult leader. Any such event will be clearly communicated with me beforehand. I have read and agree to the Terms and Conditions stated above.

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Date:\_\_\_\_\_

Signature of Parent/Guardian