

2024 – 2025 AWANA REGISTRATION FORM

FAMILY INFORMATION

Parent(s)/Guardian: _____

Address: _____

Phone: _____ / _____ / _____ Phone: _____ / _____ / _____

Email: _____

Emergency Contact: _____ Phone: _____ / _____ / _____

Home Church: _____

Were you brought by a friend? If so, who? _____

CHILD/CHILDREN INFORMATION

CUBBIES (3 & 4yr old)

Allergies? _____

Name: _____ M / F Age: _____ Birthdate: ____/____/____

Name: _____ M / F Age: _____ Birthdate: ____/____/____

SPARKS (K, 1st, 2nd grade)

Allergies? _____

Name: _____ M / F Age: _____ Birthdate: ____/____/____

Name: _____ M / F Age: _____ Birthdate: ____/____/____

T&T BOYS & GIRLS (3rd – 6th grade)

Allergies? _____

Name: _____ M / F Age: _____ Birthdate: ____/____/____

Name: _____ M / F Age: _____ Birthdate: ____/____/____

Terms and Conditions:

- 1) 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.
- 2) 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- 3) I grant permission for a photo of my child to appear in an unpublished club directory to be used by AWANA Leaders only.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.

X _____
Signature of Parent/Guardian

Date: _____