

# Fayetteville Street Baptist Church Awanas Registration Form



**Cubbies:** Preschool

**Sparks:** K – 2<sup>nd</sup> Grade

**T&Ts:** 3<sup>rd</sup>-6<sup>th</sup> Grade

Dear Parents,

Please return this completed registration/permission form with your child to Awana. (One per child)

Clubber's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Home Church: \_\_\_\_\_

Have you attended AWANA previously? \_\_\_\_\_ Church: \_\_\_\_\_

\*Health problems, allergies, or any restrictions in game participation:

\_\_\_\_\_

\*Emergency contact person if parents cannot be reached:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Emergency contact relation to child: \_\_\_\_\_

I hereby give my permission for my child to attend and participate in the Fayetteville Street Baptist Church AWANA Club and any special activities and events planned by the AWANA Club. I do hereby, authorize emergency treatment be given if necessary only after a reasonable effort has been made to reach me, the parent(s) or guardian. I, the undersigned, also agree to release and hold harmless the AWANA leadership of Fayetteville Street Baptist Church and AWANA Clubs International from any and all liabilities or claims for personal injury which may be incurred by my child while attending and participating in the AWANA Club and its activities and special events.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_