

# AWANA REGISTRATION FORM 2020-2021

*\* Please fill out this form for each clubber \**

**Group:** (Circle your clubber's group)

**Sparks** - **T&T** - **Trek** - **Journey**  
K-2<sup>nd</sup>      3<sup>rd</sup>-6<sup>th</sup>      7<sup>th</sup>-9<sup>th</sup>      10-12<sup>th</sup>

**Clubber's Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Parents' First and Last Names** \_\_\_\_\_

**Landline:** \_\_\_\_\_ **Cell Phones:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Contact for Awana Closures due to weather** Check your preference:

/\_ / **E-mail:** \_\_\_\_\_ /\_ / **Phone No.** \_\_\_\_\_ /\_ / **Text** \_\_\_\_\_

**Sickness during Awana, call** \_\_\_\_\_ **at** \_\_\_\_\_

Persons that can **pick up your Awana child other than the parent:**

\_\_\_\_\_

**Any Restrictions, Allergies, Learning Challenges:** \_\_\_\_\_

**Emergency Information:** When parents cannot be reached,  
list someone who may be contacted to pick up your child in **an emergency:**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

## Photo Release Form

I \_\_\_\_\_ give permission to the First Baptist AWANA clubs for the  
parent's name

photo release of my child, \_\_\_\_\_ for display and/or materials  
child's name

for the AWANA Clubs.