



# REGISTRATION FORM

## AWANA Clubs 2017-2018

<b>Parent/Guardian Name:</b>		<b>Parent/Guardian Phone #:</b>	
(1)		(1)	
(2)		(2)	
<b>Mailing Address:</b>		<b>Email Address:</b>	
<b>In case of an emergency (alternate contact other than parent):</b>			
<b>Individuals authorized to pick up your child:</b>			
<b>Name(s):</b>		<b>Phone # (s):</b>	
<b>Medical/Photography Release:</b>			
<p>In the event of an emergency that requires medical treatment for my child, I understand that every effort will be made to contact me or my alternate emergency contact. However, if I/we cannot be reached, I give permission to Craig's Baptist Church staff/volunteers to secure the services of a licensed physician to provide the care necessary for my child's well-being. I agree to assume responsibility for all costs associated with any incident or medical treatment of my child. I also understand the photographs and video footage of my child may be taken for promotional and informational purposes. I give permission for video and/or photos of my child to appear among other general event photos. Personal information about my child will not be listed with these photographs or videos.</p>			
Parent/Guardian signature: _____			

<b>Child's Name (1):</b>		<b>Paid _____ R/U/HB</b>	
Date of Birth: ____/____/____ Age: ____		Allergies:	
Has your child attended AWANA before? Yes / No		Shirt/Vest Size:	
<b>Which Club is the appropriate age group for your child? Please circle one:</b>			
A. Puggles (2-3 yrs old)            B. Cubbies (4 yrs old-PreK)            C. Sparks (K-2 <sup>nd</sup> Grade)            D. Truth & Training (3 <sup>rd</sup> -6 <sup>th</sup> Grade)            E. Teen (7 <sup>th</sup> Grade & Up)			

**Location of Event: Community Life Center \* 14120 W. Catharpin Road, Spotsylvania, VA**  
**14123 W. Catharpin Road, Spotsylvania, VA 22551 \* 540/854-5284 \* [churchoffice@craigchurch.org](mailto:churchoffice@craigchurch.org)**

**AWANA CLUBS FAMILY REGISTRATION  
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<b>Child's Name (2):</b>	<b>Paid _____ R/U/HB</b>
<b>Date of Birth:</b> ____/____/____ <b>Age:</b> _____	<b>Allergies:</b>
<b>Has your child attended AWANA before? Yes / No</b>	<b>Shirt/Vest Size:</b>
<b>Which Club is the appropriate age group for your child? Please circle one:</b>	
A. Puggles (2-3 yrs old)   B. Cubbies (4 yrs old-PreK)   C. Sparks (K-2 <sup>nd</sup> Grade)   D. Truth & Training (3 <sup>rd</sup> -6 <sup>th</sup> Grade)   E. Teen (7 <sup>th</sup> Grade & Up)	
<b>Child's Name (3):</b>	<b>Paid _____ R/U/HB</b>
<b>Date of Birth:</b> ____/____/____ <b>Age:</b> _____	<b>Allergies:</b>
<b>Has your child attended AWANA before? Yes / No</b>	<b>Shirt/Vest Size:</b>
<b>Which Club is the appropriate age group for your child? Please circle one:</b>	
A. Puggles (2-3 yrs old)   B. Cubbies (4 yrs old-PreK)   C. Sparks (K-2 <sup>nd</sup> Grade)   D. Truth & Training (3 <sup>rd</sup> -6 <sup>th</sup> Grade)   E. Teen (7 <sup>th</sup> Grade & Up)	
<b>Child's Name (4):</b>	<b>Paid _____ R/U/HB</b>
<b>Date of Birth:</b> ____/____/____ <b>Age:</b> _____	<b>Allergies:</b>
<b>Has your child attended AWANA before? Yes / No</b>	<b>Shirt/Vest Size:</b>
<b>Which Club is the appropriate age group for your child? Please circle one:</b>	
A. Puggles (2-3 yrs old)   B. Cubbies (4 yrs old-PreK)   C. Sparks (K-2 <sup>nd</sup> Grade)   D. Truth & Training (3 <sup>rd</sup> -6 <sup>th</sup> Grade)   E. Teen (7 <sup>th</sup> Grade & Up)	
<b>Child's Name (5):</b>	<b>Paid _____ R/U/HB</b>
<b>Date of Birth:</b> ____/____/____ <b>Age:</b> _____	<b>Allergies:</b>
<b>Has your child attended AWANA before? Yes / No</b>	<b>Shirt/Vest Size:</b>
<b>Which Club is the appropriate age group for your child? Please circle one:</b>	
A. Puggles (2-3 yrs old)   B. Cubbies (4 yrs old-PreK)   C. Sparks (K-2 <sup>nd</sup> Grade)   D. Truth & Training (3 <sup>rd</sup> -6 <sup>th</sup> Grade)   E. Teen (7 <sup>th</sup> Grade & Up)	