

# NCBC AWANA Registration Form 2018-2019

Family Last Name: \_\_\_\_\_

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

Mother's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency Contact (Mom, Dad, Other?): \_\_\_\_\_

Attends Church At: \_\_\_\_\_

| Child's Name | Gender<br>M or F | Birth Date:<br>MM/DD/YY | Grade | Cubbies<br>(Ages 3,4) | Sparks<br>Kdgtm - 2 | T & T<br>Girls | T & T<br>Boys | Allergies |
|--------------|------------------|-------------------------|-------|-----------------------|---------------------|----------------|---------------|-----------|
|              |                  |                         |       |                       |                     |                |               |           |
|              |                  |                         |       |                       |                     |                |               |           |
|              |                  |                         |       |                       |                     |                |               |           |
|              |                  |                         |       |                       |                     |                |               |           |

Who has permission to pick up your child/ren? \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Cash: \_\_\_\_\_ Check # \_\_\_\_\_