

Upper Room Bible Church
2018-2019 AWANA REGISTRATION FORM

(PLEASE COMPLETELY FILL OUT ONE FORM PER CHILD)

CHILD'S NAME: _____ GENDER: _____
BIRTHDATE: _____

GRADE: _____ AGE: _____

PARENT'S OR GUARDIAN'S NAME(S):

STREET ADDRESS:

CITY: _____ STATE: _____
ZIP CODE: _____

HOME PHONE: _____ CELL PHONE: _____
CELL PHONE: _____

CURRENT ACTIVE E-MAIL ADDRESS:

CHURCH YOUR CHILD ATTENDS ON SUNDAYS:

SCHOOL YOUR CHILD ATTENDS:

URBC, IN THE EVENT OF AN EMERGENCY, WILL TRY TO FIRST CONTACT THE PARENTS. HOWEVER, IN THE EVENT THAT WE CANNOT REACH YOU, IS THERE ANOTHER NON-PARENT RESPONSIBLE ADULT THAT YOU WOULD AUTHORIZE US TO CONTACT? LIST THAT INFORMATION ON THE EMERGENCY CONTACT LINE(S) BELOW.

EMERGENCY CONTACT: _____
PHONE: _____

EMERGENCY CONTACT: _____
PHONE: _____

FOR THE SAFETY OF YOUR CHILD, WE WILL ONLY RELEASE YOUR CHILD TO:

1) NAME: _____ CONTACT NUMBER: _____

2) NAME: _____ CONTACT NUMBER: _____

3) NAME: _____ CONTACT NUMBER: _____