

AWANA REGISTRATION FORM (2014-2015)

Child's/Children's Names	Age	Grade	Birth date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Parent(s) Name: _____

Address: _____ City _____ St _____ Zip _____

2 Phone #s during club time: _____ / _____

Church Home: _____ Brought By: _____

Any physical limitations, _____ May we use your child's picture in **Y** **N**
 Allergies or medications? _____ the paper or on our AWANA web site?

****Adult(s) Authorized to pick up child:** _____

Please sign the **PARENT HANDBOOK ACKNOWLEDGMENT** below.
I have read and understand the Parent handbook material for AWANA at FBC Beebe.

Parent / Guardian: _____ (Signed) Date: _____

Parent / Guardian: _____ (Printed)

PRICE LIST

PUGGLES (2 - 3 yr olds)

T-Shirt: \$10.00 x __ = ____

2T 3T 4T 5T 6T

SUBTOTAL: \$ _____

CUBBIES (4yrs - PreK)

Vest: \$11.00 x __ = ____

4 5 6 8 10

Book Bag (opt.): \$7.00 x __ = ____

SUBTOTAL: \$ _____

SPARKS (K - 2nd grade)

Vest: \$10.00 x __ = ____

S M L XL XXL

Book Bag (opt.): \$5.00 x __ = ____

SUBTOTAL: \$ _____

T & T (3rd - 6th grade)

Uniform for 3rd - 4th: \$15.00 x __ = ____

10 12 14 AS AM AL AX

Uniform for 5th & 6th: \$15.00 x __ = ____

YM YL AS AM AL AX

OPTIONAL items:

Awana Drawstring Bag (blue): \$5.50 x __ = ____

SUBTOTAL: \$ _____

Children

Dues Pd Sem: (\$8.50) x __ = \$ ____

Dues Pd Year: (\$17.00) x __ = \$ ____

Can you sponsor a clubber? Donations/Sponsor \$ _____

Plus other subtotal + _____

TOTAL AMOUNT: \$ _____

***NOTE:** 1st copy of each book provided by the church; any replacement copies will be \$9.00 each.
 Scholarships are available upon request **AND completion of registration forms.**

Please indicate below.

DATE PAID: _____ Cash

TOTAL PAID: _____ **CK#** _____

First Baptist Church

P.O. Box 67 Beebe, AR 72012 (501)882-3342

Liability Release

RELEASE OF ALL CLAIMS

We, the undersigned parent(s) or legal guardian(s) for _____,

(Child/Children)

do hereby release, forever discharge and agree to hold harmless *1st Baptist Church* and the representatives thereof from any and all liability, claims, or demands for personal injury, sickness, or death, as well as

property damage and expenses of any nature whatsoever which may be incurred by my child in the course

of participation in *the AWANA program* for the club year of _____

(Activity)

Furthermore, we agree to assume all responsibility for any of the previously mentioned occurrences. We give authorization for the church to provide all necessary food, transportation, and lodging (if applicable).

We give our permission for our child to participate in the aforementioned activity, and for any representative of the church to obtain necessary medical treatment. We assume responsibility for any medical bills incurred.

Should our child have to return home before the group for medical or disciplinary reasons, we hereby assume any costs incurred.

Print Child's Name

Father's Signature

Date

Mother's Signature

Date

Legal Guardian's Signature

Date

Insurance Company

Both parents must sign, unless only one parent has legal custody. In such case, please indicate non-custodial parent's name and whether to contact in case of emergency.

Notary

Date

Physician's Name and Phone

Emergency Contact and Number

Policy Holder and Number

Noncustodial Parent and Number

Y N
Contact?