

AWANA REGISTRATION FORM 2021-2022

NAME _____ CLUB _____

BIRTHDATE _____ GRADE _____
Month /Day/Year

PARENTS/GUARDIANS
NAMES _____

PLEASE **PRINT** CLEARLY

ADDRESS _____
House Number/Street City Zip code

E-MAIL _____ Cell Phone _____

EMERGENCY CONTACT (other than phone number listed above)

Name _____ Phone _____

ALLERGIES/ MEDICAL CONDITIONS _____

PERMISSION FOR PHOTOS TO BE TAKEN:

Photographs may be taken at various times of individuals and groups involved in AWANA. Some photos may be posted on the CCC website or Facebook page, but persons photographed will never be personally identified unless they specifically grant the church permission to do so. Please initial.

Yes, I give permission _____ No, I do not give permission _____

PAYMENT (Circle what you need)

Sparks Uniform \$11

T&T Uniform \$17

Handbook \$11

Yearly Dues \$15

Office Use Only:

PAID _____