

**Awana Clubber Registration**

**Bible Baptist AWANA Club**

4001 W. Kirby

Champaign, IL 61822

**Club Year: 2023/2024**

**-Please Print-**

<u>Parent/Guardian</u>	<u>Number/E-mail address</u>	<u>Contact Person</u>
Name(s): _____	Home Phone: _____	_____
Address: _____	Work Phone: _____	_____
City: _____ State: _____ Zip: _____	Cell Phone: _____	_____
Home Church: _____	E-mail: _____	_____
Persons (other than parents) authorized to pick up children: _____	Other: _____	_____
	Emergency: _____	_____

\*Emergency Contact During Club Time (other than parents)

<u>Child's First and Last Name</u>	<u>Nickname</u>	<u>Birth Date</u>	<u>Gender</u>	<u>Grade</u>	<u>Last Book Completed</u>	<u>Need Book</u>	<u>Need Uniform</u>
_____	_____	_____	_____	_____	_____	Yes/No	Yes/No
_____	_____	_____	_____	_____	_____	Yes/No	Yes/No
_____	_____	_____	_____	_____	_____	Yes/No	Yes/No
_____	_____	_____	_____	_____	_____	Yes/No	Yes/No
_____	_____	_____	_____	_____	_____	Yes/No	Yes/No

<u>Child</u>	<u>Doctor Name &amp; Phone</u>	<u>Dentist Name &amp; Phone</u>	<u>Allergies/Meds/Special Needs</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Note: All Awana Club leaders and listeners must submit to a background check before working with the children.**

**Terms and Conditions**

**Office Use ONLY**

- 1) I understand that my child/children may participate in physical activities such as those held during Game Time. As with any physical activity, there is a risk of injury. I fully accept this risk and hold harmless from any legal liability, Bible Baptist Church and any persons involved in the Awana Club ministry. \_\_\_\_\_  
Initials
- 2) In the event of an emergency that requires medical treatment for the above named child/children, I understand every effort will be made to contact me or my emergency contact. However, if I/we cannot be reached, I give my permission to the AWANA volunteers to secure the services of a licensed physician to provide the care necessary for my child's well being. I assume responsibility for all costs connected to any accident or treatment of my child. \_\_\_\_\_  
Initials
- 3) I grant permission for a photo of my child to appear in an unpublished club directory to be used by Awana Leaders only. I also give permission for photo(s) of my child to appear among other general club photos as long as there is no identifying information shown. \_\_\_\_\_  
Initials
- 4) Parents or authorized persons are to pick up all children and sign them out prior to leaving the club. Children will NOT be allowed to leave on their own. \_\_\_\_\_  
Initials
- 5) I grant my permission for a photo of my child to appear on Bible Baptist Church social media pages as long as there is no identifying information shown. \_\_\_\_\_  
Initials

**Fees:**  
 Dues \_\_\_\_\_  
 Book \_\_\_\_\_  
 Uniform \_\_\_\_\_  
 Bag \_\_\_\_\_  
 Total Due \_\_\_\_\_  
 Amt. Paid \_\_\_\_\_  
 NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I have read and agree to the Terms and Conditions stated above

X \_\_\_\_\_  
 Signature of Parent/Guardian Date