

Awana Clubber Registration

BVBC Awana Club

Club Year: 2017-2018

- Please Print -

4701 Sweetwater Rd
Bonita, CA 91902

<u>Parent /Guardian</u>	<u>Number / E-mail address</u>	<u>Contact Person</u>
Name(s): _____	Cell Phone: _____	_____
Address: _____	E-Mail: _____	_____
City: _____ State: _____ Zip: _____	Home Phone: _____	_____
Home Church: _____	Work Phone: _____	_____
Persons (other than parents) authorized to pick up the 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>School</u>	<u>Need Book</u>	<u>Need Uniform</u>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

<u>Child</u>	<u>Doctor Name and Phone</u>	<u>Insurance Co and Policy #</u>	<u>Last Td Shot</u>	<u>Allergies / Meds / Special Needs</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I am interested in helping: ___ Leader ___ Listener/Helper ___ Special Events(Cafe, Fair, etc.) ___ Awana Store ___ Outing Driver
 ___ Open your home for party or pool party ___ Bake cakes/treats for club parties/Awana Fair
 Note: All Awana Club leaders and listeners must submit to a background check before working with the children.

Terms and Conditions

- 1) I hereby permit my child/children to participate in all Awana games and other related activities. I am aware that these activities may involve some hazard. I fully accept this risk and I hereby release Bonita Valley Baptist Church, its staff, sponsors or volunteers of any liability which might result due to injury or illness of my child during the 2017-2018 club year. I understand that reasonable precautions will be taken to safeguard my child.
- 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 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.
- 3) (Circle One) I grant/or do not grant my permission for a photo of my child to appear in an unpublished club directory to be used by Awana Leaders only.
- 4) (Circle One) I give/or do not give permission for photo(s) of my child to appear among other general club photos as long as there is no identifying information shown.
- 5) I grant permission for my child to travel to/from Awana Club events with an adult leader. Any such event will be clearly communicated with me beforehand.

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

X _____
 Signature of Parent/Guardian Date

Office Use

- Fees:
- Dues: \$34 per child
- Books:
- Cubbie/Sparks \$11.50
 - 3rd & 4th T&T \$11.50
 - 5th & 6th T&T \$10.50
 - Trek \$11.50
 - Journey \$21.50
- Uniforms:
- Cubbie/Sparks Vest \$14.50
 - Girls'/Guys' Gray \$28.00
 - T&T UA/UC \$20.75
 - Trek \$12.00
 - Journey \$27.00 - \$32.50