Family Registration Form
AWANA 2022-2023
Begins September 11th, 2022

(Please print)

Cubbies 3-5yrs
Sparks K-2nd
T&T 3-6th
TREK 7&8th
Journey 9-12th

$70/per Child

Child's Name	Male/Female	Birth date	Grade Fall 2022	Club Placement
_____ Last First Middle	____/____	___/___/___	_____	**C S T TR J**
_____	____/____	___/___/___	_____	**C S T TR J**
_____	____/____	___/___/___	_____	**C S T TR J**
_____	____/____	___/___/___	_____	**C S T TR J**
_____	____/____	___/___/___	_____	**C S T TR J**
_____	____/____	___/___/___	_____	**C S T TR J**

# of Children _____ x $70 per child = **$_____FEE** Method of payment: Cash Check (Calvary Bible)

Parents/Guardian Name _____ Relationship to child _____
Last First

Address _____Cell Phone: _____
Street/P.O. Box City State Zip

Email Address _____

Emergency contact: _____ Relationship: _____
Name Phone

State any pertinent medical information _____
_____

Physician _____ Phone ( ) _____
Family Health Insurance _____
Subscriber's Name _____ Policy # _____
Insurance Mailing Address _____
_____

Does child regularly attend church? No___ Yes___,Where?_____

New to AWANA? No___ Yes___

In case of illness or injury, Calvary Bible Church has my permission to procure medical treatment for the above named minor. I understand that Calvary Bible Church does not provide medical insurance or reimbursement for medical fees or prescriptions and that I am responsible for any and all fees and charges arising from illness or injury that may occur to the above named minor during this activity with Calvary Bible Church.

Your signature below grants Calvary Bible Church Awana Club permission to publish photos of your child in our video presentations, brochures, bulletin boards, etc. Limited scholarships available, ask the secretary about them.

_____ _____

Signature of Parent/Guardian Date