

Awana Clubber Registration

Club Year: 2009-2010

- Please Print -

Awana
5632 Nickle Road
Knoxville, TN 37921

<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 the children: _____	Other: _____	_____
_____	Emergency*: _____	_____

* Emergency Contact During Club Time (other than parents)

<u>Child's Name (First, Middle, Last)</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>Dentist Name and Phone</u>	<u>Allergies / Meds / Special Needs</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I am interested in helping: ___ Weekly ___ Every other week ___ Monthly ___ For Special Events
 Note: All Awana Club leaders and listeners must submit to a background check before working with the children.

Terms and Conditions

See Additional Form

Office Use

Fees:

Dues _____

Book _____

Uniform _____

Total Due _____

Amt Paid _____

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

X _____
 Signature of Parent/Guardian Date