Awana Clubber Registration **Club Year: 2023-24**

- Please Print -

Community Bible Chapel Awana Clubs 577 Greenough Rd. Cooperstown, NY 13326

| Parent/Guardian Name(s): | | | Number/Email Address Home Phone: | | | Contact Person |
|--|--|---|--|---|--|--|
| | | | | | | |
| Address: | | | Cell Phone 1: | | | |
| City:Sta | te: Zip: | | Cell Phone 2: | | | |
| Home Church: | | | E-mail: | | | |
| We require that parents/guardia pick up your child/ren? Name/s: | | | • | - | r person/s (other than | parents) authorized to |
| Emergency: If we are unable to note that the large state of the large | | | | | | |
| Child's First and Last Name | <u>Nickname</u> | | Gender M or F. | <u>Grade</u> | School | |
| | | | | | | |
| | | // | M or F. | | | |
| | | // | M or F. | | | |
| | | // | M or F. | | | |
| | | | | | | |
| persons involved in the 2) In the event of an emer made to contact me or volunteers to secure the responsibility for all contact me or all grant permission for the second | hild/children may of injury. I fully ac e Awana Club Min gency that requir my emergency co e services of a lice sts connected to a a photo of my chil | y participate in cept this risk a istry. es medical treantact. However ensed physician any accident or d to appear in a | physical activind hold harmle atment for the art, if I/we cannon to provide the treatment of nan unpublished | ties such as tess from any above named t be reached e care necess ny child. | chose held during Game legal liability, Commur I child/children, I unde , I give my permission to sary for my child's well ory to be used by Awan | e Time. As with physical nity Bible Chapel and any rstand every effort will be to the AWANA being. I assume a Leaders only. I also give |
| church website). 4) I grant permission for a communicated with m | ny child to travel e beforehand. | to/from Awan | a Club events v | • | | ntifying information (i.e. a |
| I have read and agree to the | | | auuve | | | |
| XSignature of Parent/Gua | | | Date | | | |