

# **Awana**™ 2011-2012 REGISTRATION

Date \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_

Location during Awana \_\_\_\_\_

Phone (mom) \_\_\_\_\_  C  H  W

Phone (dad) \_\_\_\_\_  C  H  W

Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

We attend church at \_\_\_\_\_

We do not attend church

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\*Parents are required to be available to substitute at least once per semester. When substitutes are needed, I would most enjoy working with:

Puggles (2-3 year olds)       Cubbies (Pre-K)       Sparks (Kinder-2nd grade)

T&T (3rd-4th grade)       T&T (5th-6th grade)       Games

Check-in/Secretary       Preschool Large Group

Elementary Large Group

I would like to sponsor an Awana clubber with a donation in the amount of \$ \_\_\_\_\_ **(over)**

# CHILDREN

Name \_\_\_\_\_  Male  Female  
Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Club \_\_\_\_\_ Team \_\_\_\_\_  
Allergies \_\_\_\_\_

Name \_\_\_\_\_  Male  Female  
Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Club \_\_\_\_\_ Team \_\_\_\_\_  
Allergies \_\_\_\_\_

Name \_\_\_\_\_  Male  Female  
Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Club \_\_\_\_\_ Team \_\_\_\_\_  
Allergies \_\_\_\_\_

Name \_\_\_\_\_  Male  Female  
Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Club \_\_\_\_\_ Team \_\_\_\_\_  
Allergies \_\_\_\_\_

Name \_\_\_\_\_  Male  Female  
Grade \_\_\_\_\_ Birthday \_\_\_\_\_ Club \_\_\_\_\_ Team \_\_\_\_\_  
Allergies \_\_\_\_\_