



Registration

2011-2012

3 years to Pre-K

Child's Name: _____
First M.I. Last

Address _____
Street _____
City State Zip

Phone _____ Cell _____

Parent's Name _____
First M.I. Last

Parent's Name _____
First M.I. Last

Parent's Location during club: _____

Child's Birthday _____ Grade & School: _____
Month Day Year

Church Attending _____

Other Brothers and/or Sisters in Awana: _____

Comments (problems, allergies, other needs): _____

Names of other Authorized Adults for Child Pick-up: _____

Parent's E-mail Address: _____

We would like to send you reminders of special Awana events (theme nights, off nights, etc.) so your child never misses any of the fun and excitement. We will not release this information outside of our Awana leadership and your address will not appear to others receiving the notifications. We are doing this as a simple service to keep you fully informed.

OFFICE USE ONLY				Date	Amt Due	Amt Paid
Uniform:	4	5	6	8	\$ _____	\$ _____
Handbook					_____	_____
Dues:					_____	_____
Payment:	Cash	_____	Check #:	_____	Total \$ _____	\$ _____