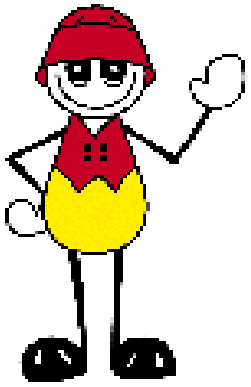

SPARKS REGISTRATION

2011-2012

Kindergarten through 2nd grade

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						Amt Due	Amt Paid
Dues:						$ _____	$ _____
Uniform:	6	8	10	12		$ _____	$ _____
Handbook:		Skipper		Hiker	Climber	_____	_____
Payment:	Cash	_____	Check #:	_____	Total	$ _____	$ _____