

**2019- 2020 - ARAPAHO ROAD - AWANA - FAMILY REGISTRATION & MEDICAL RELEASE FORM**

**STUDENT'S INFORMATION**

CLUB	STUDENT'S NAME [First, Last]	GENDER	DOB	GRADE	ALLERGIES OR Other Medical Issues	Approved Adults to Pick Up My Child[ren] or Student[s] Please also add phone # for Adult[s]

PARENTS SIGNATURE for MEDICAL RELEASE & PHOTO RELEASE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_

PARENT/GUARDIAN NAME(S)

CELL & HOME NUMBERS

E-MAIL ADDRESSES

Mom: \_\_\_\_\_ Mom: \_\_\_\_\_ Mom: \_\_\_\_\_

Dad: \_\_\_\_\_ Dad: \_\_\_\_\_ Dad: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ HOME CHURCH: \_\_\_\_\_

ARE YOU CURRENTLY LOOKING FOR A CHURCH? \_\_\_ Yes \_\_\_ No WOULD YOU BE WILLING TO SERVE IN ARAPAHO ROAD AWANA? \_\_\_ Yes \_\_\_ No

If this is your first year to attend Awana at Arapaho Road, which church did you previously attend Awana? \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:** [NAME & RELATIONSHIP TO STUDENT] \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

This agreement is valid from Sunday, September 1, 2019 – Sunday, May 3, 2020. I, [Parent's Name], \_\_\_\_\_ understand that the student(s) named above may participate in physical activities such as those held during Game Time on Club nights, at Regional events, at State events or at National events. I understand that there is always a possibility of injury in participating in physical activities. I fully accept this risk and do not hold any legal liability to Arapaho Road Baptist Church or its Awana Clubs, Awana Youth Ministry, Awana Clubs International or any persons involved in these groups.

In the event of an emergency that requires medical treatment for the student(s) named above, I understand that every effort will be made to contact me or my emergency contact. However, if I/we cannot be reached, I give my permission to an Awana Leader/Parent to secure the services of a licensed physician or qualified medical/emergency professional to provide the necessary care for my student(s) wellbeing. I assume full responsibility for all costs connected to any accident or treatment of my child.

I grant permission for my child to travel to/from any/all Awana or Awana Youth Ministries events with 2 non-related adult leaders/parents. Any such event will be clearly communicated with me beforehand.

I grant permission for my student(s) to be photographed or videotaped at Awana Club Meetings or Events, these photos/videos may be used on the Arapaho Road website, Awana website and/or at Special Events, Presentations or Ceremonies.

**NOTARY INFORMATION:** \_\_\_\_\_ personally appeared before me, a notary public, to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of this \_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ [year]. **NOTARY SEAL:**

**NOTARY PUBLIC SIGNATURE:** \_\_\_\_\_

**MY COMMISSION EXPIRES ON:** \_\_\_\_\_

**[AWANA OFFICE – USE ONLY]**

**FAMILY NAME:** \_\_\_\_\_

**ACCOUNT SHEET**

<b>STUDENT'S NAME</b>	<b>DATE</b>	<b>TRANSACTION DESCRIPTION</b>	<b>COST</b>	<b>CHECK # /CASH</b>	<b>AMOUNT PAID</b>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**2019 – 2020 AWANA & AWANA YOUTH MINISTRIES PRICE SHEET**

**A-WANNA BEES - \$25 [includes dues, shirt, & bag]**

**CUBBIES - DUES - \$40 / HANDBOOK - \$11 / UNIFORM - \$12 / BOOK BAG - \$7 [optional]**

**SPARKS - DUES - \$40 / HANDBOOK - \$11 / UNIFORM - \$12 / BOOK BAG - \$7 [optional]**

**T&T - DUES - \$40 / HANDBOOK - \$11 / UNIFORM - \$15 / SLING BAG - \$9 [optional]**

**TREK - DUES - \$40 / HANDBOOK - \$11 / SLING BAG - \$13 [optional]**

**JOURNEY - DUES - \$40 / HANDBOOK - \$20 FOR 2 Books / SLING BAG - \$13 [optional]**