

2011-2012

FBC Centerton – Awana registration

(One application per child..please)

CLUBBER INFORMATION

Child's name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Child's birthdate: _____ Grade in school: _____

Parent / Guardian name: _____

Church now attending _____ Email: _____

EMERGENCY INFORMATION

Persons to contact in case of an emergency if parent(s) can not be reached:

Name	Relationship	Phone Number
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_____	_____	_____
_____	_____	_____

Physician's Name _____ Physician Phone No. _____

Special Instructions: _____

EMERGENCY AUTHORIZATION

I hereby authorize the leaders of AWANA to act on my behalf when I cannot be contacted, IN CASE OF AN EMERGENCY, resulting in the need of medical attention for my son/daughter named above.

I also agree to hold harmless the AWANA leadership, First Baptist Church, Centerton, Arkansas and AWANA Clubs International from any accidents as a result of my child's participation in its activities. Furthermore, I agree to reimburse First Baptist Church, Centerton, Arkansas for all medical expenses.

Parent/Guardian Signature

Date