

Awana Clubber Registration
Club Year: 2011-2012

Carnation Bible Church
32615 NE 45th St.
Carnation, WA 98014
425-333-0035

Registration:

All children must have a completed registration form with the "Medical Consent and Release of Liability" section filled out and signed by a parent or legal guardian.

Registration Fees:

We have calculated the cost of presenting the Awana program and put it into a single registration payment. Children will not be admitted to Awana without registration accompanied by full payment unless special arrangements have been made in advance with Michael or Deidre Cairns.

It is our policy that financial hardship should not prevent participation in Awana. If you need financial assistance or would like to arrange a payment schedule, please mark the appropriate place below.

Awana Clubs depend upon the service of dedicated parents like you! Please consider volunteering in your child's club.

- Yes! I would like to assist weekly. I am most interested in helping with _____.
- I would like to assist _____ times per month or as I am able.
- I am not available to help at this time.

Registration Fee \$35 per child (\$105 max per family)	Number of children: _____	x \$35 per child	Total: \$_____
Uniform (Sparks and T&T)			
Sparks Vest (may be used for all grades K-2)	Number of vests: _____	x \$15 per vest	Total: \$_____
T&T Uniform (may be used for all grades 3-5)	Number of shirts: _____ Circle size(s) needed: YL YXL S M L XL	x \$15 per shirt	Total: \$_____
Book Bag (Sparks and T&T) (optional)	Number of bags: _____	x \$5 per bag	Total: \$_____
Scholarship Donation			Total: \$_____
TOTAL TO PAY \$_____			

Make checks payable to *Carnation Bible Church*.

- I would like to apply for financial assistance.
- I would like to arrange a payment schedule.

Office use only

Registration Received	Date / Check #	Due	Paid	Unpaid
		\$	\$	\$

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Parent/Guardian Name(s):	Home Phone:	Cell Phone:
Address:	Email Address:	

What church do you attend, if any? _____

Child's Name:	Birthdate:	Gender:	Grade:	Allergies/Other Needs:
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____

I hereby give my permission to Carnation Bible Church to print or use any photographs or video footage taken of me or my child(ren) while at Awana for church use presentations. No personal names will be used in such presentations.

_____ Initial here

Authorization to Consent to Treatment of a Minor and Release from Liability

I, the undersigned parent (legal guardian) of _____, minor(s), understand that in the event medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I do hereby authorize Carnation Bible Church as an agent for the undersigned to consent to an x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the PHYSICIANS AND SURGEONS ACT and on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or said hospital.

It is understood that this authorization is given in advance of any specific need for authorization of consent as outlined above.

I hereby release Carnation Bible Church of any legal responsibility if my child becomes ill or injured in any way. I have read the above and consent to my child(ren)'s participation in the activities of the event (sports, games, transportation, etc.) I also understand that my child is subject to the authority of the church's designated leaders. Any failure to comply with leadership could result in my child(ren)'s dismissal and my being called to pick him/her up from the event.

X

Signed: Parent/Legal Guardian

Date

Printed name: _____

Emergency phone # _____ Other # _____

Insurance Company _____ Policy # _____