

2023-2024

- Please Print -

Welcome to our Awana Club! We're so glad you're here. Please complete this form. You may enter multiple children on this one form. Please remember to sign the bottom. You may use the backside of this form if you need more room to write.

Parent(s): _____ Home Church: _____
 Address: _____ Persons (other than parents) authorized to pick up the children: _____
 City: _____ State: _____ Zip: _____

Contact Name	Relationship	Email Address	Phone	Text Ok	Cell Carrier
Primary:	_____	_____	_____	<input type="checkbox"/>	_____
Emergency:	_____	_____	_____	<input type="checkbox"/>	_____
Other:	_____	_____	_____	<input type="checkbox"/>	_____

Child's First and Last Name	Nickname	Birth Date	Gender	Grade	Other children I know at Awana
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please list important medical information for EACH child below: (allergies, medications, special needs, etc.)

I am interested in helping: ___ weekly ___ every other week ___ monthly ___ for special events

Note: All Awana Club volunteers must complete the Milton Seventh Day Baptist Safety in Ministry requirements before working with children.

Terms and Conditions

Office Use

- 1.) I understand that my children may participate in physical activities such as, but not limited to, those held during Game Time. As with any physical activity, there is a risk of injury. I fully accept this risk and hold harmless from any legal liability, the Milton Seventh Day Baptist Church and any persons involved in the Awana Clubs ministry.
- 2.) In the event of any emergency that requires medical treatment for the above named children, I understand every effort will be made to contact me or my emergency contact. However, if I/we cannot be reached, I give my permission to the Awana volunteers to secure the services of a licensed physician to provide the care necessary for my child's well being. I assume responsibility for all costs connected to any accident or treatment of my child.
- 3.) I understand that at this Awana club or other Awana related events, my children may be photographed. I agree to allow my children's photo, video or film likeness to be used for any legitimate purpose by the club, leaders, organizers or church members, including but not limited to social media and newspapers. When an identification is made, only the first name of the child will be used unless a parent is notified otherwise.
- 4.) I grant permission for my child to travel to/from Awana Club events with an adult leader. Any such event will be clearly communicated with me beforehand.

Secretary notes:

I agree _____ Date _____