

Last Name Initial: _____

End of Year T-Shirt Size: _____



Awana Clubber & LIT Registration Club Year 2018-2019 Complete 1 form per clubber or LIT



Clubbers Name: (First) _____ (Last) _____

Birth Date: _____ Age: _____ Grade: _____ Boy or Girl

Circle the year clubber will be entering in the age appropriate category below

Sparks (Kindergarten to 2nd Grade) Circle Year: 1st 2nd 3rd

T&T Ultimate Adventure (3rd & 4th Grade) Circle Year: 1st or 2nd

T&T Ultimate Challenge (5th & 6th Grade) Circle Year: 1st or 2nd

Trek (7th & 8th Grade) Circle Year: 1st or 2nd

Journey (9th to 12th Grade) Circle Year: 1st 2nd 3rd 4th

Main Contact Parent Full Name: _____

Phone:(____) _____ Email: _____

Parent 2 Full Name: _____

Phone:(____) _____ Email: _____

Mailing Address: _____

City: _____ St: _____ Zip: _____

Allergies: _____

Other Important Info: _____

Can you help with Special Events? Name(s) of helper(s): _____

Yes___ No ___ : **Web Photo Release** – I hereby authorize Grace Community Church to use my child’s photograph and/or likeness on the church’s website, www.gracekona.org and/or the Awana FB page, now and in the future without further notice or compensation. I understand that my child’s name, address, or any other information about my child will not be used on the sites. This consent may be withdrawn at any time by contacting the church office. I have read and agree to the statement above.

Signature of Parent

Date

Sparks Handbook \$16: HangGlider WingRunner SkyStormer \$_____

Sparks Optional Items: Handbook Bag \$9 \$_____

Sparks Vest \$15: S M L XL XXL XXXL \$_____

T&T Handbook \$16: GraceInAction EvidenceOfGrace AgentsOfGrace Ult Chal 2 \$_____

T&T Jersey \$20: YS YM YL AS AM AL AXL \$_____

T&T Optional Items: Sling Bag \$14 \$_____

LIT Handbook: Trek \$16 Journey \$22 \$_____

LIT T-Shirt \$15: YS YM YL AS AM AL AXL AXXL \$_____

Registration Fee \$17 \$_____

The Registration fee helps cover the cost of patches, jewels, special events held throughout the year, and year-end awards.

This fee is waived for any clubber whose parent volunteers or for youth in Leaders In Training program on a full time basis.

To participate as a full-time volunteer, go to Admin Table and complete our volunteer registration & background check forms. Upon completion, a brief interview will be held.

Checks made to: Grace Community Church **Total Due** \$_____

Paid Ck No:_____ **Paid Cash:**_____ **Balance Due:**_____



AWANA AWANA 2018-2019

Clubber Medical Release and Authorization Form

(List ALL FAMILY on one form)

Clubber(s) Name(s): _____ Date: _____

Parent(s) or Guardian Name(s): _____

Main Contact Parent Full Name: _____ Phone: (____) _____

Parent 2 Full Name: _____ Phone: (____) _____

Person(s) authorized to pick up minor: _____

Alternate Emergency Contact Name: _____ Phone: _____

Relationship to Minor: _____

Health Insurance Carrier: _____

Minor's Physician: _____ Phone Number: _____

Minor's Dentist: _____ Phone Number: _____

Specific medical allergies, chronic illnesses, and/or other conditions of minor, if any. If "none," so state:

Medical Treatment Authorization: I understand that I will be notified in the case of a medical emergency, as soon as possible given the circumstances of the emergency. However, in the event that I cannot be reached, I authorize Grace Community Church, the Awana Commander, and/or volunteers present with my child to contact any medical personnel necessary to properly evaluate the condition. In addition, I further authorize Grace Community Church the Awana Commander, and/or any volunteer present with my child, to consent to the provision of emergency medical care, including necessary and appropriate x-ray examinations, anesthetic, medical or surgical diagnosis and/or treatment, and hospital care, as recommended by medical professionals. I understand that Grace Community Church will not be responsible for any medical expenses incurred on the basis of this authorization.

Waiver & Release: As a parent and/or legal guardian, I remain legally responsible for any personal actions taken by my child. Additionally, I understand that activities may involve active games, outdoor activities, occasional off-site field trips, etc. I understand that my child's participation in these activities, as well as those program-related activities not listed, may expose him/her to known danger as well as unanticipated risks. Acknowledging that such risks exist, I hereby waive, release, absolve, indemnify and agree to hold harmless Grace Community Church, respective directors, officers, agents, volunteers, and employees from any and all claims of liability for personal injury or property damage my child may inflict or suffer while participating.

Signature of Parent or Guardian

Date