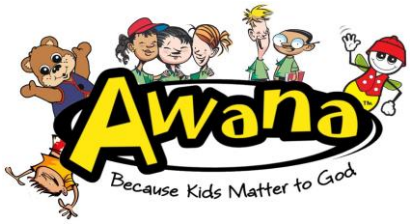
Last Name Initial: _____



Awana Volunteer Registration
Club Year 2017-2018

First/Last Name: _____

Birth Date: _____ Years in Awana: _____ T-Shirt Size:_____

Need Awana Leader Shirt: YES NO

Preferred area to volunteer: _____

Home Church: _____

Food Allergies:_____

Other Allergies:_____

Phone:(____)_____ Email:_____

Spouse's First & Last Name:_____

Phone:(____)_____ Email:_____

Mailing Address:_____

City:_____ St:_____ Zip:_____

Notes:_____

_____

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 This consent may be withdrawn at any time by contacting the church office.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.

_____ yes _____ no

_____

Signature Date