

**2011-2012 Awana at First Baptist Church of Redmond, Washington
REGISTRATION FORM**

(Please Print)

Today's date:

CLUBBER INFORMATION

Clubber's Last name:	First:	Middle:	Nickname:
1.			
2.			
3.			
4.			
5.			

Birth date:	Age/Sex:	Grade in School / Club Assigned
1.		
2.		
3.		
4.		
5.		

Street address, City, Zip:	P.O. Box / Mailing Address
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Home phone #: ()	Parent/Guardian Cell #: ()	Emergency Contact #: ()	Clubber Special Needs (allergies, diabetes, etc.)
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Other family members at club here:

FAMILY INFORMATION

Person responsible for Clubber:	Address (if different):	Home phone no.: ()
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E-mail address(es):	Cell phone no.: ()
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Spouse/Other responsible adult:	Address (if different):	Home phone no.: ()
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E-mail address(es):	Cell phone no.: ()
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Where do you attend church?

Adult's relationship to Clubber: Child Step-Child Other (please describe relationship)

IN CASE OF EMERGENCY

Name of local friend or relative (not living at same address):	Relationship:	Home phone no.: ()	Cell phone no.: ()
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The above information is true to the best of my knowledge. I give permission for the children listed below to participate in Awana at First Baptist Church of Redmond (FBCoR). I give permission for them to participate in all areas of Awana. If my child has special needs (health, diet, etc.), I will let the staff know upon registration. I give my permission for my child's image to be used for promotional purposes. In case of emergency, FBCoR will attempt to contact me. If they are unsuccessful, they have permission to give emergency treatment.

Patient/Guardian signature

Date