



Awana Club Registration Form

Club Calendar: Sept. 9, 2011– June 8, 2012

Time: 8:00 – 9:45PM (Friday night)

Fee: **by 9/9 \$35.00; after 9/9 \$40.00** (make check payable to CCIC)

Due: **\$1.00** every night




Chinese Church in Christ – Tri Valleys

6900 Valley Trails Dr.

Pleasanton, Ca 94588

Tel: 925-963-6688

5/27/11

						
#1 Cubbies(3-4yrs),	#2 Sparks(K-2 nd),	#3 T&T(3-6 th),				
<u>Child's Name (First, Last)</u>	<u>Nickname</u>	<u>Birth Date</u>	<u>Gender</u>	<u>Grade</u>	<u>Club</u>	<u>School</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Parent/Guardian

Chinese & English Name(s):

Father _____

Mother _____

Home Phone: _____

Cell Phone: _____

Address: _____

E-Mail: _____

Language speaking: _____

Family Church: _____

Fellowship group: _____

Have you been baptized: Yes ___ No ___

Persons (other than parents) authorized to pick up the children: _____

Emergency contact (other than parents) name and phone #: _____

<u>Clubber</u>	<u>Doctor Name and Phone</u>	<u>Dentist Name and Phone</u>	<u>Medical (allergies, meds, special needs)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Terms and Conditions

- I understand that my child/children may participate in physical activities 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, CCIC-NV and any persons involved in the Awana Club ministry.
- In the event of an emergency that requires medical treatment for the above named child/children, I understand that 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.
- 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.

I have read and agree to the terms and conditions stated above

X _____
Signature of Parent/Guardian

Date

Office Use

Date: _____

Fee: _____

Book: _____

Uniform: _____