






First Baptist Church
Floresville, Texas
2008-2009 Registration Form

Name: _____

Birthdate: _____ Gender (circle): Male Female

Address: _____ Phone: _____

Please Mark Your Child's Age/Grade as of 09/01/2008

			
<input type="radio"/> 3 Yrs <input type="radio"/> 4 Yrs <input type="radio"/> 5 Yrs	<input type="radio"/> K <input type="radio"/> 1st <input type="radio"/> 2nd	<input type="radio"/> 3rd <input type="radio"/> 4th <input type="radio"/> 5th <input type="radio"/> 6th	<input type="radio"/> 7th <input type="radio"/> 8th

Parent/Guardian Information:

Name: _____ Relationship: _____

Address: _____ Phone: _____

Home Church: _____

Email: _____ Cell Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Home Church: _____

Email: _____ Cell Phone: _____

Alternate Emergency Contact Information (not parent/guardian above):

Name: _____ Phone: _____ Relationship: _____

Medical Conditions, Special Needs or Allergies (include food allergies):

Has your child previously been in AWANA? Yes No If yes, Where? _____
Last Date Attended _____ Last book completed _____

AWANA Clubs often use photographs and video footage shot during the year for promotional materials, website and club newsletters. If you would prefer that the child above **NOT** be shown in this material, please check this box.

Please do **NOT** show photograph/video

By signing below, you state that your child's registration information is accurate, your child is authorized to participate in the club, and you and your child will adhere to any club rules. AWANA reserves the right to ID any adult before releasing a child.

Parent/Guardian Signature: _____ Date: _____