



**2017-2018  
AWANA REGISTRATION:  
FAMILY FORM**

Office Notes: <input type="checkbox"/> Paid Amount: _____ <input type="checkbox"/> Check Number: _____ <input type="checkbox"/> Cash
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Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Club \_\_\_\_\_

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Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Club \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Club \_\_\_\_\_

Street Address/Apt. \_\_\_\_\_

City, State, and ZIP code \_\_\_\_\_

School \_\_\_\_\_ Church Home \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone (primary) \_\_\_\_\_ (secondary) \_\_\_\_\_

Father & Mother/Legal Guardian \_\_\_\_\_  
(Primary emergency contact - include phone number if different from above)

Secondary emergency contact (name and number) \_\_\_\_\_

Person(s) authorized to pick up child: \_\_\_\_\_

Specific allergies, chronic illnesses, or other conditions we should be aware of: \_\_\_\_\_

E-Mail Address \_\_\_\_\_  
(For Awana communications, e.g., newsletters, club cancellations or break reminders – Please **print** legibly)

All children need a uniform and a book per their grade level.  
 If you already have a uniform from a previous year, please mark the box with the word **“HAVE.”**

**When choosing sizes, please account for multiple years of wear!**

- Cubbies sizes: 4, 5, 6, 8, 10
- Sparks sizes: 6, 8, 10, 12, 14, 16
- Truth & Training T-shirt 3<sup>rd</sup> & 4<sup>th</sup> grade sizes: 10, 12, 14, Adult S, M, L, XL
- Truth & Training Jersey 5<sup>th</sup> & 6<sup>th</sup> grade sizes: Youth M, L, Adult S, M, L, XL
- Student Leader sizes: Adult Regular or Ladies Cut, S, M, L, XL

Items Needed	Prices	Size	Quantity	Family total
Dues (administration and supplies)	\$30/child			
Cubbies Uniform Vest (2 years of pre-school) Sizing: 4, 5, 6, 8, 10	\$13			
Cubbies Book	\$11			
Sparks Uniform Vest K – 2 <sup>nd</sup> gr. Sizing: 6, 8, 10, 12, 14, 16	\$13			
Sparks Book (Hang Glider/Wing Runner/Sky Stormer) <small>Please circle book needed</small>	\$11			
T&T Uniform Jersey 3 <sup>rd</sup> & 4 <sup>th</sup> gr. Sizing: 10, 12, 14, Adult S, M, L, XL	\$16			
T&T Uniform Jersey 5 <sup>th</sup> & 6 <sup>th</sup> gr. Sizing: Youth M, L, Adult S, M, L, XL	\$16			
T&T books Ultimate Adventure <input type="checkbox"/> Book (3 <sup>rd</sup> & 4 <sup>th</sup> Grade) Ultimate Challenge 2 <input type="checkbox"/> Book 1 (5 <sup>th</sup> Grade) <input type="checkbox"/> Book 2 (6 <sup>th</sup> Grade)	\$11			
Scholarship Donation (Any amount is appreciated!)	\$22			
	\$			
			<b>Grand Total</b> →	

**Make checks out to: Rose Hill Alliance Church.** Send money with registration forms by **August 31.**  
 If you need scholarship assistance, see Amanda or Kimberly for an application. If you are able to help fill our scholarship fund, we are so grateful!  
 Please designate these monies as shown on the form above and send in with your registration forms.

**COMPLETE SIDE 2**

## First Aid and Emergency Medical Treatment

I recognize that there may be occasions where the child(ren) named above may be in need of first aid or emergency medical treatment as a result of an accident, injury, illness or other health condition. I do hereby give permission for agents of Rose Hill Alliance Church to seek and secure any needed medical attention or treatment for the child(ren) named above including hospitalization if, in the agent's opinion, such need arises. In doing so, I agree to pay all fees and costs arising from this action to obtain medical treatment. I give permission for attending physician(s) and other medical personnel to administer any needed medical treatment, including surgery.

### Release of Liability

By signing this Permission and Waiver Form, I attest that the child(ren) named above are capable of withstanding both the physical and mental demands of Awana activities. I also expressly assume all risks to the child(ren) participating in the activities, whether such risks are known or unknown to me at this time. I further release Rose Hill Alliance Church and its ministers, leaders, employees, volunteers and agents from any claim that my child(ren) may have against them as a result of injury or illness incurred during the course of participation in Awana activities. This release of liability is also intended to cover all claims that members of the child(ren)'s or family or estate, heirs, representatives or assigns may have against the church or its ministers, leaders, employees, volunteers, or agents. I further agree to indemnify and hold harmless the church and its ministers, leaders, employees, volunteers, or agents from any and all claims arising from or as a result of injury or illness of my child(ren) during such activities.

### Photo Permission Form

Rose Hill Alliance Church uses photos to promote ministries and events via the church webpage, printed publications, hallway bulletin boards, classroom displays, and Awana awards slideshow. Please indicate your permission with an **X**:

- Yes**, you may use my child(ren)'s pictures in the ways defined above.
- Limited use** (please initial acceptable uses)
- Church website \_\_\_\_\_
  - Church printed publications \_\_\_\_\_
  - Hallway bulletin boards \_\_\_\_\_
  - Classroom displays \_\_\_\_\_
  - Awana Awards slide show \_\_\_\_\_
- No**, I do not want my child/ren to have their pictures used as defined above.

I agree to the above statements regarding first aid and emergency medical treatment, release of liability, and photo permission:

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Father/Mother/Legal Guardian's signature

Date

**If at any time you wish to change your decision, please contact the church office at 651.631.0173.**

Office notes: