



# Registration and Release Form

Welcome to Country Oaks Baptist Church's AWANA Club! This form must be completed and signed in order for your child to participate. Please print unless advised for signatures.

Clubber Last Name      First      Middle Initial      Birth Date      Grade      School

Parent(s) Name  Yes I would like to volunteer!

Address (Please change if different:)      City: Tehachapi      State: CA      Zip Code: 93561

Home Phone      Cell Phone

E-mail Address

Does your family have a church home?  Yes  No      Name of Church: \_\_\_\_\_

Allergies/Medications/Additional Information?

### PAYMENT

*Registration and materials fees includes club uniform and curriculum book for the club year. Uniforms, additional handbooks and replacement for lost items will have additional payments. AWANA service and multi-child discounts, as well as, scholarships available.*

**PLEASE SELECT:**

**Option 1: One Time Payment: Registration (\$15) + Materials Fee (\$10) = \$25**

Uniform T-Shirt Needed?     Y     N

Please Check Size:     AS     AM     AL     AXL     A2XL

**Pick Up Authorization: The following individual(s) are authorized to pick up my child (must be over 18):**

Name(s) \_\_\_\_\_

1) I understand that my child may participate in physical activities such as those held 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 Country Oaks Baptist Church and any persons involved in the AWANA Club Ministry.

2) In the event of an emergency that requires medical treatment for the child named above, I understand every effort will be made to contact me. 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.

Medical Insurance      Policy #

Doctor's Name      Phone Number

**Not Currently Insured. I understand that I am responsible for all medical costs due to necessary medical treatment.**

3) I give permission for photo(s) of my child to appear among other general club photos with no identifying information shown in various Country Oaks Baptist Church publications. I also give permission for identifying information to be shown with the photo in the case that my child is selected as the Clubber of the Month to be shown in the AWANA Sunday video during COBC's church services only.

I have read and agree to the Terms and Conditions stated above.

Signature of parent or legal guardian      Date

<b>CLUB USE ONLY:</b>			
Early Registration <input type="checkbox"/> Y <input type="checkbox"/> N	DISCOUNT: <input type="checkbox"/> AS <input type="checkbox"/> MC	Payment Date: ____/____/____	
REG. FEE: \$ _____ +	UNIFORM/BOOK: \$ _____	TOTAL PD: \$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____