



REGISTRATION & RELEASE FOR 3-4 YEAR OLDS



Visit countryoaks.org for our other kid programs!

Space is limited and some children may go on a waiting list.

CLUBBER INFORMATION

			M / F	/ /	
Clubber Last Name	First Name	Middle Initial		Birthdate	Age
Parent(s)/ Guardian Name					
Address <i>Please change if different</i> City: Tehachapi State: CA Zip: 93561					
Mom's Cell Number			Dad's Cell Number		
Does your family have a church home? Y N Name of Church: _____ Clubber is FULLY potty-trained: Y N					

MEDICAL INFORMATION

Medical Insurance Carrier	Policy Number
Doctor's Name	Phone Number
Allergies/Medications/Additional Medical Information	
<input type="checkbox"/> Not Currently Insured. I understand that I am responsible for all medical costs due to medical treatment obtained for my child.	

FEES & CLUB GEAR

Cubbie Registration: **\$50/Clubber**

Cubbie Uniform (Required): **\$15** **My Cubbie already has a vest** **My Cubbie needs a size** **SM(3/4) MED(4/5)**

Cubbie Handbag (Optional): **\$7** **My Cubbie would like a Handbag**

LIABILITY RELEASE

Pick Up Authorization: The following indivial(s) are UN-authorized to pick up my child.

___ 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.

___ 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 Condidtions stated above.

Signature of Parent or legal Guardian	/ /
	Date

CLUB USE ONLY	EARLY REGISTRATION: Y N	WAITING LIST # _____	DISCOUNT: AS MC	PAYMENT DATE: _____
	REG. FEE: \$ _____ + UNIFORM/BOOK: \$ _____ + OTHER: \$ _____ - DIS: \$ _____ = \$ _____	CASH	CHECK # _____	