

1 AWANA REGISTRATION FORM

CHILD'S NAME _____ Male ____ Female ____

CHILD'S AGE _____ BIRTH DATE ____/____/____ GRADE IN SCHOOL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PARENT'S NAME _____ PHONE _____

CELL / OTHER PHONE _____ EMAIL (optional) _____

EMERGENCY CONTACT _____ PHONE _____

CHURCH AFFILIATION _____

Does your child have allergies, medical conditions or other information we should know about? Yes _____ (explain below) No _____ *(Use back of page if necessary)*

Do you give permission for your child to participate in the Awana program, including Bible memorization, games and activities? Yes _____ No _____

Do you give permission to Ebenezer Bible Chapel to photograph your child during Awana activities and to use the photos for in-house promotional use or on the Awana page of the Ebenezer Bible Chapel web site? Persons photographed will not be identified by name on the web site. Yes _____ No _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PLEASE MAIL THIS FORM IN ADVANCE OR COMPLETE AND TURN IT IN THE FIRST NIGHT YOUR CHILD ATTENDS AWANA. THANK YOU!

Ebenezer Awana Clubs
PO Box 233, Elverson PA 19520
Phone: 610-286-9662
awana@ebenezerbible.org
Located four miles east of Elverson, just off Rt 23 at 289 Warwick Furnace Road