

# COMMUNITY BIBLE CHURCH AWANA

## AWANA REGISTRATION PACKET

Dear Parents/Guardians,

Welcome! We are so happy that you are here! Each week your child will enjoy Handbook Time, Game Time, and Council Time. They will be learning how to study the Bible for themselves-and hide God's Word in their hearts! Please join with us in prayer that we will see children impacted for Jesus Christ in AWANA this year!

### AWANA Nightly Schedule:

- 6:15pm Registration/Check-in Begins-AWANA secretaries will be in the back hallway to check your child in for each club. Please do not drop off your child before 6:15pm.
- 6:30pm AWANA Club Begins
- 8:00pm AWANA Club Concludes-**Please return punctually to pick up your child! Your child's safety is our priority. Our policy requires that parents or authorized adults pick up children through the 4<sup>th</sup> grade. We cannot send your child with older siblings or release them to meet you in the parking lot, hall, etc.**

## HOW CAN YOU HELP FROM HOME?

Your encouragement and interest in your child's progress is extremely valuable. You can encourage your child in the following ways:

1. The foundation for AWANA is God's Word, The Bible. Supporting your child's memory work is vital to his/her success. Remind them to work on their verses during the week. There may be times that you will need to listen and give hints to assist memorization. If your child has difficulty, please let us know! Our leaders and directors may be able to help with other techniques.
2. Parental signatures are not accepted for section completion. This policy applies even to parents who volunteer in AWANA. There are, however, some activities in the handbook that do require parental feedback. Your participation on these pages is necessary.
3. Your child will earn points for their team by attending club in uniform, bringing their handbook, and bringing their bible. Please help them to remember to bring these items.
4. There may be times when parents will be needed as volunteers for special activities. Please consider if you would like to participate. If interested, notify the club's director or secretaries.
5. Last, but most importantly, pray for your child! Pray that the Word of God they are memorizing will touch their heart. Pray that they will come to know Jesus Christ and learn to serve Him.

## WHICH AWANA CLUB WILL MY CHILD BE IN?



**Cubbies**  
3&4 years Old

\*Cubbies must be 3 yrs. by September 1<sup>st</sup>, and potty trained



**Sparks**  
K-2<sup>nd</sup> Grades



**Truth & Training (T&T)**  
3<sup>rd</sup> & 4<sup>th</sup> Grades



**Club 56**  
5<sup>th</sup> & 6<sup>th</sup> Grades

- |                      |      |                      |      |          |      |          |      |
|----------------------|------|----------------------|------|----------|------|----------|------|
| ● Book:              | \$13 | ● Book:              | \$13 | ● Book:  | \$13 | ● Book:  | \$13 |
| ● Vest:              | \$13 | ● Vest:              | \$13 | ● Shirt: | \$17 | ● Shirt: | \$16 |
| ● Optional Book Bag: | \$7  | ● Optional Book Bag: | \$7  |          |      |          |      |

Books, uniforms, and bags will not be distributed before payment is received. If your child's book is lost, it will need to be replaced at the additional cost.

There is no charge for dues this year, however, it would be appreciated if you would consider donating toward the cost of the AWANA store, awards, special events, and parties that is incurred by the AWANA clubs.

# AWANA ENROLLMENT FORM

We cannot allow your child to participate in club until this form is completed and turned in.

Parent/Guardian (1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Parent/Guardian (2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Other Adult(s) Authorized to Pick-up: \_\_\_\_\_

\_\_\_\_\_

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**Child Name:** \_\_\_\_\_ (This will be the name used on their name tag)

Friend Request? \_\_\_\_\_

Has your child been in AWANA elsewhere? \_\_\_\_\_ Last AWANA Club completed? \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Additional Information (Allergies, Medical Conditions, etc.): \_\_\_\_\_

\_\_\_\_\_

**Child Name:** \_\_\_\_\_ (This will be the name used on their name tag)

Friend Request? \_\_\_\_\_

Has your child been in AWANA elsewhere? \_\_\_\_\_ Last AWANA Club completed? \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Additional Information (Allergies, Medical Conditions, etc.): \_\_\_\_\_

\_\_\_\_\_

**Child Name:** \_\_\_\_\_ (This will be the name used on their name tag)

Friend Request? \_\_\_\_\_

Has your child been in AWANA elsewhere? \_\_\_\_\_ Last AWANA Club completed? \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Additional Information (Allergies, Medical Conditions, etc.): \_\_\_\_\_

\_\_\_\_\_

**Community Bible Church Medical Release:**

As the Parent/Guardian, I do hereby authorize Community Bible Church to call an emergency ambulance in case of an accident or acute illness, and to arrange for necessary emergency medical and surgical care in case I am not available. If the physician listed below is not available, any qualified physician called by Community Bible Church may treat or do whatever is necessary for the health and well-being of my child(ren). It is understood that every conscious effort must be made to notify parents/guardian before such action is taken. I agree to accept responsibility for payment of the above medical services. I also release Community Bible Church, other organizations, and individuals involved of any liability for accidents incurred during any of the AWANA club activities.

**Child Name:** \_\_\_\_\_

**Child Name:** \_\_\_\_\_

**Child Name:** \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

In case of Emergency, please call (please list a friend or neighbor to call if you cannot be reached):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Community Bible Church Photography Policy:**

During the AWANA year, we will be taking pictures of your child(ren) during regular club nights as well as at special events. Some of the images will be posted for club publicity purposes (i.e., on our bulletin boards, year-end slide show, Facebook, in promotional videos, and/or CBC's website). Images will only be used by Community Bible's AWANA program and will not be released to any other entity. Children's names will not appear with photos except on the Book Finishers bulletin board where we will post first names only.

If you do **NOT** want us to use photographs of your child(ren) you must check here:

Signed by Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

This release form will be used during the entire club year. The document is applicable to both regular club meetings and outings (AWANA Games, Field Trips, etc.).

# AWANA FEE SCHEDULE

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Cubbies Name(s): \_\_\_\_\_ Already Has Book?    Y    N

Sparks Name(s): \_\_\_\_\_ Already Has Book?    Y    N

T&T Name(s): \_\_\_\_\_ Already Has Book?    Y    N

Club 56 Name(s): \_\_\_\_\_ Already Has Book?    Y    N

	Price	Quantity	Size	Total
<b>CUBBIES:</b>				
Book	\$13.00		—	
Vest                      Available Sizes:    Child    S (4)    M (5)    L (6)	\$13.00			
Optional Book Bag	\$7.00		—	
<b>SPARKS:</b>				
Book	\$13.00		—	
Vest                      Available Sizes:    Child    S (6)    M (8)    L (10)	\$13.00			
Optional Book Bag	\$7.00		—	
<b>TRUTH &amp; TRAINING:</b>				
Book	\$13.00		—	
Shirt                      Available Sizes:    Youth    S (10)    M (12)    L (14)	\$17.00			
<b>CLUB 56:</b>				
Book	\$13.00		—	
T-Shirt                      Available Sizes:    Youth    S    M    L	\$16.00			
<b>Other:</b>				
			—	
<b>Total Amount Owed:</b>				

**For Official Use:**

Payment Method: \_\_\_\_\_      Date Received: \_\_\_\_\_      Amount: \_\_\_\_\_

Payment Method: \_\_\_\_\_      Date Received: \_\_\_\_\_      Amount: \_\_\_\_\_

Payment Method: \_\_\_\_\_      Date Received: \_\_\_\_\_      Amount: \_\_\_\_\_