

**Winfield Bible Chapel
AWANA REGISTRATION FORM**

Year: _____

Child's Name _____	Home Phone _____
Birth Date ____/____/____ Age ____	Grade ____ Boy ____ Girl ____
Address _____	Mobile # _____
City / State _____	Zip Code _____
Parent's Names _____	Parent E-mail _____
Allergies/Restrictions _____	Church Attending _____
_____	Brought By _____

Please circle correct shirt size:

Youth Sm Youth Med Youth Lg Adult Sm Adult Med Adult Lg

Please check this child's club:

____ Cubbies ____ Sparks ____ T&T ____ Trek ____ Journey
(Age 3* and 4) (Grades K-2) (Grades 3-6) (Grades 7-8) (Grades 9-12)
**must be 3 by Sept. 1*

(Optional) I hereby certify that my child _____ attends church regularly and should receive Church Attendance Awards (for Cubbies, Sparks, T&T).

Signature of Parent or Guardian Date

In Case of Emergency Call (other than parents):

Name _____ Relationship _____ Phone _____

Permission/Consent/Release of Liability

I, the undersigned, request that my child be permitted to participate in the Winfield Bible Chapel AWANA Ministry. I agree to hold harmless Winfield Bible Chapel or any of their agents in the event of accident, illness, injury, or death, which may occur during any and all activity (AWANA sponsored activities). I also grant permission to photograph/video my child for use in representing Winfield Bible Chapel and/or AWANA, such as (but not limited to) our bulletin board, Facebook page, & website).

Signature of Parent or Guardian Date

Questions? Please contact one of the following:

Commander: Chris Burke	(410) 549-2251
Journey Director:	
Trek Directors: Jay & Cindy Harmon	(410) 848-0468
T&T Directors: Chris & Debbie Burke	(410) 549-2251
Sparks Director: Kristen Golden	goldenkn14@gmail.com
Cubbies Director: Kathy Brighoff	(410) 596-1916

