



Cambridge Awana Registration 2023-2024

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Print Last Name: _____

Child(ren) Name (First/Last)	Birthdate	Age	Grade	Shirt size
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Mailing address	Email(s) for Awana-related announcements or cancellations
_____	_____
_____	_____

Cambridge School System? _____ (If Cambridge Schools cancel, we cancel)

Emergency and Absence Contact

Parent/Guardian (in order of contact) and **emergency contact** info during Awana time. **Also used if your child fails to check in.**

Name	Phone	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Medical

In case of medical emergency, I understand every effort will be made to contact the parents/guardian of the child/ren. In the event that I cannot be reached, I hereby give permission to the medical examiner selected by the Awana staff to hospitalize, to secure proper treatment for, order injection, anesthesia, or surgery for my child(ren) as named on this form.

Enrollment

I hereby enroll and give permission for my child to participate in the planned activities of Cambridge Awana Club at Willerup Church. I understand that I am responsible for transportation to and from Awana Club. I also agree to hold blameless the Awana Clubs, Awana volunteers, Willerup Church and staff for all activities.

Signature of Parent or Guardian

Date

Two-sided form



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Photo Release

Throughout the year, photos will be taken during our Awana Club activities. We would like to display these photos in our church newsletter, on our website/Facebook, in the church, and in the Cambridge News. If you do not wish your children's picture to be used in this way, please let us know in writing when you turn in this form.

Church (circle): Willerup Not Attending Other _____

Special Needs

Please explain any allergies, physical restrictions, food requirements, medical conditions that we should know to best minister to your son/daughter during Awana time (Be sure to specify **which child has what need.**)

HELPING WITH AWANA

 I am willing to help with the Awana club by:

- Small group leader
- Substantiate leader
- Listener
- Providing a snack*
- Helping with games
- Help with record keeping

* Snacks provided each week for 20-25 clubbers - we will have a sign up sheet for dates. Cash donations for snacks are also welcome.

Return form to:

Cambridge Awana Club
Willerup Church
414 W. Water St.
Cambridge, WI 53523
608-333-9623 (Andrea's Cell)
awana@willerupchurch.org

Make checks payable to "Willerup Church" and place "Awana" in the memo line.

Print Last Name:

OFFICE USE ONLY (circle one)

\$40	\$80	Scholarship	Schol. fund donation
single child	two or more		\$ _____

TOTAL RECEIVED \$ _____ Date _____ Initial _____

Shirt Sizes

Cubbies: 4 5 6 8 10
Sparks: 6 8 10 12 14 16
T&T: Youth 10 12 14 Adult S M L XL
Jr. Leader: Adult S M L XL XXL