

Green Street Baptist Church AWANA Registration Form

Child/Student Info

Date: _____
 Child's Name: _____ Sex: Male Female
 Address: _____
 City: _____ State: _____ Zip: _____
 Birthdate: _____ Age: _____ Current Grade: _____
As of Aug. 31st As of Aug. 31st
 Allergies: _____
 Siblings (Name/Age): _____

Parent Info

Child's T-Shirt Size _____
 Parent/Guardian's Names: _____
 Email(s): _____
 Home Phone: _____
 Cell Phone(s): _____
 How would you like to be contacted if needed? Call Cell Text Cell Other _____
 Church You Attend: _____

Security Info

Emergency Contact Name: _____ **Relationship:** _____
Other than Parent/Guardian (To Child/Student)
Emergency Contact Phone: _____
 Any special concerns or instructions: _____
Brought by: _____
 The following have permission to pick up my child(ren) _____

Parent/Guardian's Signature: _____

Office Use Only

Age/Grade on Aug. 31st

| | | |
|--|--|---|
| Cubbies <input type="checkbox"/> 3's <input type="checkbox"/> 4's | Sparks <input type="checkbox"/> 5K <input type="checkbox"/> 1 st <input type="checkbox"/> 2 nd | T&T <input type="checkbox"/> 3 rd <input type="checkbox"/> 4 th <input type="checkbox"/> 5 th |
|--|--|---|

Annual Registration Fee- 30.00 per Child. \$25 for each additional child. Please make checks out to Green Street Baptist Church. Cost covers portion of uniform and handbook.