Awana Club Registration Form

Club Calendar: Aug 16, 2024 – May 16, 2025 Time: 7:30 – 9:25 pm (Friday night)

Dues: \$1.00 every night

Chinese Church in Christ – Tri Valley

5064 Franklin Dr. Pleasanton, Ca 94588

Tel: 925-467-1580 Form revised: 6/21/2024



| Sparks (K-2 nd grade) T&T (3-6 th grade) <u>Child's Name (First, Last)</u> <u>Birth Date</u> <u>Gender</u> <u>Grade</u> <u>Clu</u> | lub <u>School</u> |
|---|---|
| Indicate if Returning or New Student: | |
| Parent information: Father Cell# Father E-Mail: Mother Cell# Mother E-Mail: Address: Language speaking: Home group#: | |
| Have you been baptized? Yes or _ No Persons (other than parents) authorized to pick up the children: Cell# | |
| Emergency contact (other than parents) name: Clubber Doctor Name and Phone Dentist Name and Phone Medical (allergies, meds, special needs) . | |
| Fees (for each registered child): \$50 Registration fees \$15 Book \$25 uniform Children of Leader: Registration fees waived, Please make check payable to CCIC Tri-Valley. | |
| Terms and Conditions: 1) I understand that my child/children may participate in physical activities during game time. As with any physical activity, there is a risk of injury. I fully accept this risk and hold harmless from any legal liability, CCIC-TV and any persons involved in the Awana Club ministry. 2) In the event of an emergency that requires medical treatment for the above named child/children, I understand that every effort will be made to contact me or my emergency contact. However, if I/we cannot be reached, I give my permission to the Awana volunteers to secure the services of a licensed physician to provide the care necessary for my child's well-being. I assume responsibility for all costs connected to any accident or treatment of my child. 3) Each time I give permission for my child | |
| X Signature of Parent/Guardian Date | Check #Date: Fee:\$50 Book:_\$15 Uniform:_\$25 |