CBC AWANA 2020-2021

REGISTRATION, BOOK ORDER, AUTHORIZATIONS, ETC. FOR RETURNING FAMILIES AND NEW CBC FAMILIES

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*CONGRATULATIONS! to last year's 91 PARTICIPANTS WHO FINISHED 1 HANDBOOK & 5 WHO FINISHED 2 HANDBOOKS!

*We are planning on an "Electronic Virtual Year," so registration, etc. will be different.

*FOR RETURNING FAMILIES & CBC FAMILIES, there will be No Registration Fees, only the cost for handbooks.

*Each clubber needs to purchase a handbook (except a few Sparkies who have handbooks from last year). (Uniforms are optional.)

*Please complete this form and send Page 1 as a document, or photo to CBC.AWANA@Gmail.com;

and submit the Original 2 Pages with your payment when you pick up your book(s).

PARENT(S)/GUARDIAN(S):

ADDRESS:

PHONE#:

E-MAIL ADDRESS:

HOME CHURCH:

General Permission and Authorization: I, the undersigned, understand a fundamental portion of the Community Bible Church (CBC) AWANA program is discipleship and mentorship through consistent volunteer leaders. I understand CBC AWANA volunteer leaders will be in contact with my child(ren) listed below through an electronic source, mail, or by phone weekly to disciple, mentor, and encourage them in their relationship with Jesus Christ. I understand much of this contact will take place on designated CBC AWANA nights, but may occur other days.

Signature of Father, Mother, or Legal Guardian (Please circle one.):

Printed Name

NAME OF CLUBBER	BIRTHDATE	SCHOOL GRADE FOR 2020-2021	LAST COMPLETED AWANA HANDBOOK	CLUB

OKDEK SHEET								
PRE-K, T&T, TREK	(PRE-K) CUBBIES	(3RD-6TH GRADES) T&T	(7TH & 8TH GRADES) TREK		TOTAL # OF BOOKS:	\$12/BOOK	# OF BOOKS X \$12	
Number of Books								
SPARKS	HangGlider*	WingRunner**	SkyStormer***		TOTAL # OF BOOKS:	\$12/BOOK	# OF BOOKS X \$12	
Number of Books								
	*ALL 1st-Year Sparkies begin with HangGlider .							
	**In 1st or 2nd Gra	<u>ade</u> , <u>AFTER</u> comple	etion of HangGlider					
	**In 2nd Grade, Al	FTER completion o	f HangGlider <u>&</u> Wi	ngŀ	Runner			
JOURNEY			JOURNEY		TOTAL # OF BOOKS:	\$20/BOOK	# OF BOOKS X \$20	CASH
	Nu	mber of Books						Check Box
								OR
please contact Su	uestions, or want t zie Varney (Club So C.AWANA10000@C	ecretary) (619-459				TOTAL COST		CHECK #

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If we are able to assemble or have events at CBC,

the following Information and Authorization will be needed.

NAME OF CLUBBER	ALLERGIES?	IF YES, PLEASE LIST	CLUB
Where can you (Parent or Guardian) be reached during club	and/or event time?	
Emergency Contact			
Name:		Phone:	
Doctor		Phone:	
Name:			

General Permission and Authorization to Consent to Treatment of Minor

I, the undersigned, Parent or Legal Guardian, do hereby grant permission for the child(ren) named above, to attend all the Community Bible Church AWANA Club's organized outings during this club year. Should medical care be needed, I also authorize any licensed emergency personnel, doctor, paramedic, or hospital to perform any x-ray, examination, anesthetic, medical, or surgical diagnosis or treatment and care which is deemed advisable by said emergency personnel, doctor, paramedic, or hospital regardless of where such diagnosis or treatment is rendered. It is understood that this authorization is given in advance of any specific need for diagnosis, treatment, or hospital care and intended to provide authority and power on the part of any Awana leader or personnel to give specific consent to any and all such diagnosis, treatment, or hospital care which the aforementioned emergency personnel, doctor, paramedic, or hospital in his/her best judgment may deem advisable. This authorization is made under CA. Family Code Sec. 6910.

ature of Father, Mother, or Legal Guardian: (Please circle one.)	SIGNATURE	DATE	
Printed Name of Person Signing			