

Meeting

Today's Date _____ Date Paid _____ Amount _____ Check Number _____ 2T2 _____

2024 – 2025 One Church Awana Registration

Parent(s) _____ E-mail _____

Address _____ City _____ Zip _____

Mom's cell _____ Dad's cell _____

Invited by _____ What church do you attend? _____

EB Child _____ Birthdate _____ Age on Sept 1st _____ Grade _____

Handbook: Puggles cards Cubbies Sparks (HG WR SS) T&T \$ _____

Uniform size: M L XL XXL T&T Lanyard \$ _____

Does he/she have any special needs such as medical concerns, food allergies or learning differences?

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Registration fee (_____ children x \$25.00 per child; \$75.00 maximum per family) \$ _____

Optional: Book bags or other supplies _____ \$ _____

Family total \$ _____

I want to find out more about volunteering.

Please read: Photographs are sometimes taken of Awana ministry activities for publicity and promotional purposes, which include, but are not limited to, in-house presentations, church web site, brochures, newsletters and the One Church Awana closed Facebook page. By enrolling your child in Awana, you acknowledge that his/her photo might be used. If you do not want us to use photos of your child(ren), please write "No photos" on the special needs line(s) above.

Initial here if you want to be contacted about a payment plan or partial scholarship.
