



For Office Use Only  
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 Vol. App. Form Received \_\_\_/\_\_\_/\_\_\_

**International Baptist Church Jurbise**  
**AWANA Registration 2011-2012**

- New Registration
- Re-registration-Previously enrolled in IBC Jurbise AWANA
- Transfer from another AWANA program

**CHILD (CHILDREN'S) INFORMATION**

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Name	Grade	SEX	AGE	BIRTHDATE
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Name	Grade	SEX	AGE	BIRTHDATE
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Name	Grade	SEX	AGE	BIRTHDATE
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LOCAL ADDRESS	APT	CITY	ZIP
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MAILING ADDRESS

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PARENTS NAME: Father	Mother
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TELEPHONE: Home	Mom's work	Dad's work	Mom's cell	Dad's cell
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E-MAIL ADDRESS	CHURCH MEMBERSHIP
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EMERGENCY CONTACT	RELATIONSHIP	PHONE
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SPECIAL MEDICAL CONDITIONS/ALLERGIES/MEDICATIONS CURRENTLY USING:

## **EMERGENCY AUTHORIZATION**

I hereby authorize the leaders of AWANA to act on my behalf when I cannot be contacted, IN CASE OF EMERGENCY, resulting in the need of medical attention for my son/daughter named above. I also agree to hold harmless the AWANA leadership and International Baptist Church of Jurbise from any accidents as a result of my child's participation in its activities.

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Parents/Guardian Signature

Date