



2017-2018 Registration Form

\$40 per child (Includes Handbook and Uniform, non-refundable after AWANA start)

Check payable to Grace Community Church or GCC

Clubbers Information

Name of Child #1:		Grade:	Experience in AWANA: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Birthday:	If yes, what level have you finished?	Sparks(K-2nd)	T&T(3rd-6th)
T-shirt size: (Please check one)		<input type="checkbox"/> Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth X-large <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult X-large		<input type="checkbox"/> HangGlider	<input type="checkbox"/> Ultimate Adventure 1
				<input type="checkbox"/> WingRunner	<input type="checkbox"/> Ultimate Adventure 2
			<input type="checkbox"/> SkyStormer	<input type="checkbox"/> Ultimate Challenge 1	<input type="checkbox"/> Ultimate Challenge 2
Name of Child #2:		Grade:	Experience in AWANA: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Birthday:	If yes, what level have you finished?	Sparks(K-2nd)	T&T(3rd-6th)
T-shirt size: (Please check one)		<input type="checkbox"/> Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth X-large <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult X-large		<input type="checkbox"/> HangGlider	<input type="checkbox"/> Ultimate Adventure 1
				<input type="checkbox"/> WingRunner	<input type="checkbox"/> Ultimate Adventure 2
			<input type="checkbox"/> SkyStormer	<input type="checkbox"/> Ultimate Challenge 1	<input type="checkbox"/> Ultimate Challenge 2
Name of Child #3:		Grade:	Experience in AWANA: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Birthday:	If yes, what level have you finished?	Sparks(K-2nd)	T&T(3rd-6th)
T-shirt size: (Please check one)		<input type="checkbox"/> Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth X-large <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult X-large		<input type="checkbox"/> HangGlider	<input type="checkbox"/> Ultimate Adventure 1
				<input type="checkbox"/> WingRunner	<input type="checkbox"/> Ultimate Adventure 2
			<input type="checkbox"/> SkyStormer	<input type="checkbox"/> Ultimate Challenge 1	<input type="checkbox"/> Ultimate Challenge 2
Name of Child #4:		Grade:	Experience in AWANA: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Birthday:	If yes, what level have you finished?	Sparks(K-2nd)	T&T(3rd-6th)
T-shirt size: (Please check one)		<input type="checkbox"/> Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth X-large <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult X-large		<input type="checkbox"/> HangGlider	<input type="checkbox"/> Ultimate Adventure 1
				<input type="checkbox"/> WingRunner	<input type="checkbox"/> Ultimate Adventure 2
			<input type="checkbox"/> SkyStormer	<input type="checkbox"/> Ultimate Challenge 1	<input type="checkbox"/> Ultimate Challenge 2

Parent/ Legal Guardian Information

Name:	Relationship to Child:	
Address:	City:	Zip:
Home Phone:	Cell Phone:	
Email:	Church currently attending:	

Emergency Contact (Other than parent)

Emergency Contact 1:	Phone:	Relationship to child:
Emergency Contact 2:	Phone:	Relationship to child:

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

AWANA USE ONLY	Received by:	Date:	Payment Amount:
	Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check #:	<input type="checkbox"/> Parent(s) Volunteering	<input type="checkbox"/> Not yet paid