

AWANA 2017 - 2018 Registration/Fees Information
Please read the information carefully and fill out the attached forms.

What is AWANA?

Awana stands for Approved Workmen Are Not Ashamed. It blends Bible teaching, evangelism, Scripture memorization and tons of fun. Through our **Awana** program, children learn how to plug into God's grand plan for their lives and the role they play in their families, schools, and communities.

Your child will experience:

- biblical teaching that relates to your child's age and experience
- fun games
- Bible memorization
- positive friendships
- adult affirmation and encouragement
- the basics of a relationship with God
- awards and recognition for accomplishments

What club should my child be registered for?

Cubbies (ages 3 and 4, Pre-K). **Cubbies must be 3 BEFORE Sept. 1, 2017.**

Sparks (K-2nd)

T&T Ultimate Adventure (3rd - 5th)

When do you meet?

AWANA meets on Friday's (Sept. 8 – May 4) from 7:30pm – 9:00pm. Check-In is at 7:15pm. A parent or guardian must be present for the child to check-in or check-out.

What do I need to pay for?

Each child will need to pay for a registration fee of \$30 per child (which includes their handbook and uniform).

When will my child receive their items I purchase?

Handbooks and uniforms usually come within one week of when we place the order. They will not be handed to the clubber until they have completed the entrance booklet for their group as required by AWANA. If your child is starting their second or third year of their group, then their book will be given to them as soon as the order comes in.

Who do I give my form and payment to?

Please complete the attached forms and give them with your payment to April Hui.

Who should I make out my check to?

Please make your check payable to FCBC and write Awana in the memo line. Paying by cash is also accepted.

First Chinese Baptist Church AWANA Registration Form 2017 - 2018

Parent/Legal Guardian Information			
Name of Guardian:		Relationship to child:	
Address:		Email:	
City:	State:	Zip:	
Home Phone:		Mobile Phone:	
Child's Primary Language?	Do you attend FCBC? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Church (other than FCBC):	
Emergency Contact (other than parent)			
Emergency Contact 1:		Phone:	Relationship to child:
Emergency Contact 2:		Phone:	Relationship to child:
Clubber Information			
Name of Child #1:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Club: _____ Cubbies (3yrs-PreK) Cubbies must be 3 before Sept. 1, 2017 _____ Sparks (K - 2 nd) _____ T&T (3 rd - 5 th)
Age:	Grade:	Birthday:	
Allergies (state none if none) or Special Information (Medications, activity restrictions):			
Name of Child #2:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Club: _____ Cubbies (3yrs-PreK) Cubbies must be 3 before Sept. 1, 2017 _____ Sparks (K-2 nd) _____ T&T (3 rd - 4 th)
Age:	Grade:	Birthday:	
Allergies (state none if none) or Special Information (Medications, activity restrictions):			
Name of Child #3:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Club: _____ Cubbies (3yrs-PreK) Cubbies must be 3 before Sept. 1, 2017 _____ Sparks (K-2 nd) _____ T&T (3 rd - 5 th)
Age:	Grade:	Birthday:	
Allergies (state none if none) or Special Information (Medications, activity restrictions):			
Name of Child #4:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Club: _____ Cubbies (3yrs-PreK) Cubbies must be 3 before Sept. 1, 2017 _____ Sparks (K-2 nd) _____ T&T (3 rd - 5 th)
Age:	Grade:	Birthday:	
Allergies (state none if none) or Special Information (Medications, activity restrictions):			
Authorization/Waiver			
<p>1.) My child/children may be giving reasonable emergency medical treatment in connection with all church events, and I authorize the person(s) in of the activity to administer, arrange for, and authorize such emergency medical care and treatment in my place and stead. I knowingly and voluntarily AND RELEASE all claims and causes of action of any kind whatsoever (other than for gross negligence or willful misconduct) against FCBC, its elders, p officers, staff and volunteers, which I or my child/children may hereafter have by reason of or relating to my child/children's participation at FCBC incl injury, illness, or death of my child/children and damage to any property or the property of my child/children. I UNDERSTAND THAT THE CLAIMS AN CAUSES OF ACTION HEREBY WAIVED AND RELEASED INCLUDE THOSE BASED IN WHOLE OR IN PART, ON THE ORDINARY NEGLIGENCE (BUT NOT GROS NEGLIGENCE OR WILLFUL MISONDUCT) OF FCBC, ITS ELDERS, PASTORS, OFFICERS, STAFF OR VOLUNTEERS.</p> <p>2.) I give permission for photo(s) of my child/children to appear among other general club photos in any and all media as long as there is no identifyin information published by FCBC. I hereby waive any causes of action I may have because of the use of my child's photograph.</p>			
I have read and agree to the Terms and Conditions stated above.			
_____		_____	
Printed Name of Parent/Guardian		Signature of Parent/Guardian	
		Date	

REGISTRATION FEE FORM

	<u>Price</u>	<u>Quantity</u>	<u>\$ Amount</u>
Registration Fee (SEPT. – MAY) Includes cost of handbook and uniform	\$30.00	_____	\$_____

PAYMENT METHOD

Parent's Name

Payment Method:

____ Cash ____ Check Please make checks payable to "FCBC" with "AWANA" in the memo line.

OFFICE USE ONLY:	
Payment Amount Due: _____	Payment Received Date: _____
Form of Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	
Person receiving payment: _____	

