



AWANA Boys and Girls Club REGISTRATION

MEETING SUNDAYS 4:00-5:45 PM,
10890 THORN MINT RD, SAN DIEGO, CA 92127



- NEW CLUBBER
- RETURNING CLUBBER
- GRADE IN FALL _____
- CLUB YEAR ____ to ____

CUBBIES (PRE-K)*
Child must be fully potty trained.
 AGE 3__ AGE 4+__
 VEST SIZE (vests are short):
 S/5 M/6 L/7
 XL/8 XXL/10

SPARKS (K - 2ND)
 K__ 1st__ 2nd__
 VEST SIZE:
 S/6 M/8 L/10
 XL/12 XXL/14

T&T (3RD - 6TH)
 3rd__ 4th__ 5th__ 6th__
 SHIRT SIZE:
 YOUTH: S/10 M/12 L/14
 ADULT: S M L

**Cubbies: for children the 2 years prior to Kindergarten*

NAME _____ GENDER _____ BIRTH DATE _____
(MM/DD/YYYY)

ADDRESS _____ HOME PHONE _____
CITY, STATE _____ ZIP CODE _____

ALLERGY / SPECIAL MEDICAL ATTENTION? _____
 DOES YOUR CHILD HAVE ANY SPECIAL NEEDS WE SHOULD KNOW ABOUT? No Yes (We'll follow up privately.)

FATHER'S NAME _____ FATHER'S CELL _____

MOTHER'S NAME _____ MOTHER'S CELL _____

PREFERRED EMAIL ADDRESS FOR COMMUNICATIONS FROM CLUB: _____

IS ANOTHER RESPONSIBLE ADULT AUTHORIZED TO BRING &/OR PICK UP YOUR CHILD? (IF YES, COMPLETE NEXT LINE)

NAME _____ RELATIONSHIP _____ CELL _____

NAME OF EMERGENCY CONTACT IF PARENTS CAN'T BE REACHED. _____

RELATIONSHIP TO CHILD _____ CELL _____ ALTERNATE PHONE _____

OTHER SIBLINGS IN THE PROGRAM? (NAME/CLUB): _____

ARE THERE ANY CUSTODY ISSUES STAFF SHOULD BE AWARE OF? _____

RELEASE FORM: I, as parent/legal guardian, give my permission for _____ to attend and participate in all activities of the Awana Boys and Girls Club program, located at Grace School. I further absolve and release GC2 Church, Grace School and all of their volunteers and workers from all liabilities due to loss of property or injuries sustained during the execution of this program.

Parent /Guardian Signature _____ Date _____

MEDICAL CARE RELEASE: I also give my permission to the program co-workers and/or medical personnel to provide appropriate medical treatment for the aforementioned child in case of injuries sustained during program.

Parent /Guardian Signature _____ Date _____

PHOTOGRAPHY/MEDIA RELEASE FORM: As parent/legal guardian, I also give my permission for photos/video/media of my child to be used by the Awana Boys and Girls Club program for promotional purposes, such as, but not limited to: video promotion, promotion on the Grace School and/or GC2 Church website.

Parent /Guardian Signature _____ Date _____

\$40 REGISTRATION FEE: Includes Entrance Booklet (Cubbies-Apple Acres, Sparks-Flight 3:16, or T&T-Start Zone), Handbook, Club Uniform, Prizes & Year-End Awards. Write check payable to **CG2 Church** & write **AWANA** on the Memo line. Please bring completed registration form(s) and check to the GC2 Church Office at 15936 Bernardo Center Dr., San Diego, CA 92127.

For further information, please contact Karla Ng (619) 417-5681 karla@gc2church.org