



# Moscow Awana Clubber Registration

Registration for 2023/2024 School Year

Please PRINT CLEARLY! One form per child.

Child's Name **First:** \_\_\_\_\_ **Last:** \_\_\_\_\_

**Enrolling for** (circle one):



3 & 4 year olds

*Cubbies must be 3 years old  
and potty trained by Sept. 1*



K-2<sup>nd</sup> Grades  
5-7 year olds



3<sup>rd</sup>-6<sup>th</sup> Grades  
8-12 year olds



7<sup>th</sup>-9<sup>th</sup> Grades  
13-15 year olds

Grade (for 2023/2024): \_\_\_\_\_ Birth date: \_\_\_\_\_ *Must be club appropriate age by Sept. 1*

Father's name (first & last): \_\_\_\_\_ Dad's cell: \_\_\_\_\_

Mother's name (first & last): \_\_\_\_\_ Mom's cell: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Email (our primary way to communicate): \_\_\_\_\_

Which church do you attend? \_\_\_\_\_

Allergies/Medical issues we need to know about: \_\_\_\_\_

Who may pick up your child from Awana (other than Mom & Dad)? \_\_\_\_\_

**Fee/Scholarship:** There will be a \$35.00 registration fee per child, which covers dues and supplies for the year. Vests, t-shirts, and \*optional tote bags are an additional cost:

- |   |  |
|---|--|
| <input type="checkbox"/> Cubbie vest: ..... \$14.00     | <input type="checkbox"/> T&T t-shirt: ..... \$19.00    |
| <input type="checkbox"/> *Cubbie tote bag: ..... \$7.00 | <input type="checkbox"/> *T&T tote bag: ..... \$17.00  |
| <input type="checkbox"/> Sparks vest: ..... \$14.00     | <input type="checkbox"/> Trek t-Shirt: ..... \$18.00   |
| <input type="checkbox"/> *Sparks tote bag: ..... \$7.00 | <input type="checkbox"/> *Trek tote bag: ..... \$15.00 |

Financial assistance, scholarships, and payment plans are available. Please speak with the Awana Commander

**Make Checks Payable to Trinity Baptist or TBC, Memo – Awana Registration**

**Medical & Social Release:** September 2023 – May 2024

My child has my permission to participate in all Awana activities on and off campus (providing I have been notified in advance). In case of a medical emergency, I hereby authorize the staff/volunteers of Trinity Baptist Church (TBC) to act in their best judgment to seek medical attention through appropriate means, including emergency room treatment, as deemed appropriate by attending medical personnel for my child. I also accept responsibility for expenses incurred through such treatment. I give permission for TBC to use any photos of my family or me in their publications; and I release my right to any kind of compensation.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use: \$35 Reg Fee Paid: \_\_\_\_\_ Total Paid: \_\_\_\_\_