2023-2024 Registration Form



Student Name:	Birthdate:
Address:	
City:	
Email Address:	
Parent(s) Name:	
Phone: Emergence	cy Contact Phone:
Emergency Contact Name:	Relationship to Child:
Alternate Pick-Up:	
School Child Attends:	Grade (2023-24):
Allergies:	
Home Church (if other than SRBC):	
Check AWANA Group:	
Puggles (2's & young 3's) Cubbies (Po	otty trained - <mark>2 years prior to Kindergarten</mark>)
Sparks (K-2 nd grade) T&T (3 rd -5 th (grade)
Has your child previously been involved with AWANA Sparks?	
If so (and still in Sparks), what is the last handbook he/she was in? HangGlider, WingRunner, SkyStormer Did your child finish the book? Yes No	
If coming from another AWANA program, how many boo	ks finished? Sparks: T&T:
I give permission for my child(ren)'s picture to be taken a program Yes No	nd used as promotion of Solid Rock's AWANA
I,understand that my	y child will be
involved and participating in the games and activities of a Church. I will not hold Solid Rock Bible Church staff or volduring the AWANA programs. I also commit to partnering being successful in the AWANA programs.	lunteers responsible for injuries that may occur
Parent Signature:	Date: