



**Thank you for your interest in the AWANA Program at
Emmanuel Baptist Church of Snohomish**

AWANA Club Information:

Cubbies: Age 3 - 4

Cost for books \$15

Cost for vest \$15

Cost for Club Carrying Bag *(optional)*: \$7

Sparks: Grade K - 2 Ages 5 - 8

Cost for books \$15

Cost for vest \$15

Cost for Club Carrying Bag *(optional)*: \$7

Truth & Training (T&T): Grade 3 - 6 Ages 8-12

Cost for books \$15

No uniform for T&T

Cost for Club Carrying Bag *(optional)*: \$7

Trek: Grade 7 - 8 Ages 12 - 14

Cost for books \$15

Journey: Grade 9 - 12 Ages 13 - 18

Cost for books \$20

If you would like to prepay, please mail form and payment to:

EBC AWANA PO BOX 128 Snohomish WA 98290

Questions? Contact AWANA Commander Josh Mallory

425-501-5295 joshmallory4u@gmail.com

CLUBBER'S LAST NAME _____



Emmanuel Baptist Church of Snohomish

Registration & Release Form * Club Year 2023—2024

This form is valid from September 2023 - May 2024

Parent/Guardian: Name(s): _____ Home phone: _____

Address: _____ Cell phone: _____

City: _____ State: _____ Zip: _____

Home Church: _____

Email: _____ Alternate Cell Phone: _____

Emergency Contact: _____ Relationship to Child: _____

Emergency Contact Phone Number: _____ City: _____ State: _____

Have you been part of an AWANA Club before? Y N If so, at what church? _____

Child First/Last Name	Birthdate/AGE	Gender	Grade	Awana Club (see below)
EX: Sally Smith	07/21/10 / 10	F	5th	T&T

Please complete reverse side

Child's Name	Allergies	Food Restrictions	Authorized for photos	Additional	Information				

RELEASE: I hereby give my permission for my above listed child/children to participate in the AWANA program at Emmanuel Baptist Church and all AWANA related events and outings for the school year listed above. I assure that he/she/they/is/are in good health and able to participate.

I do herewith authorize emergency treatment under the direction of any licensed physician of the above named minor in the event of a medical emergency which, in the opinion of the attending physician, may endanger life, cause disfigurement, physical impairment or undue discomfort. This authority is granted only after a reasonable effort has been made to contact me or those listed at the phone number(s) listed below. I also assume responsibility for any and all just fees and costs connected with this treatment and hereby release the Emmanuel Baptist Church and AWANA Club from any liability therefore.

If there is a behavior problem with my child(ren), I welcome a call, and if requested, will arrange for their immediate transportation from the activity.

I hereby release and absolve, Emmanuel Baptist Church, of any and all liability arising from my child's/children's participation in, including Game Times, and with the ministry listed above.

I authorize pictures of my child to be used for AWANA crafts and potentially posted on the Emmanuel Baptist Church Facebook Page.

This release form is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence.

Parent/Guardian Signature: _____ Date: _____

Please complete, sign and return via text message, snail mail, email or in person to Josh Mallory!

Mail to: EBC AWANA PO BOX 128 Snohomish WA 98290

Email: AWANA Commander, Josh Mallory joshmallory4u@gmail.com or text: 425-501-5295

**IF RECEIVED BY SEPT 17...each of your clubbers will receive
10 ADDITIONAL AWANA REWARD DOLLARS on their first night!!!**