Welcome to AWANA at Capital Bible Church

Thank you for your interest in our AWANA program at Capital Bile Church!

Schedule - We meet every Wednesday night from 6:30 to 8:00 pm, from September to May.

Appropriate Attire – Long pants are required for AWANA. We don't recommend shorts because of our Game Time. We don't want any skinned knees! Sneakers are recommended, since we do a lot of running games. Dress shoes and shoes with no back are not recommended – we don't want the kids running with no shoes on their feet.

Questions - If you have any questions do not hesitate to contact your group leader.

Cubbies: Ages 3-5 years. Leaders: Dorey Fairall & Gayle Wilk

Sparks: Kindergarten – 2nd grade. Leaders: Sandy Strine and Jenn Louw

T & T: 3rd grade – 6th grade. Leaders: Enrique Molinero and Beth Kerris

Trek: 7th – 12th grade. Leaders: Nate Myers, Sandy Hodges, & Robert Essick

Most Important Thing of All - We want you to have a great time! AWANA is a great way to learn about God through memorization, games and Bible teaching.

Capital Bible Church AWANA Registration and Applicable Release Forms Rev. 1 7-25-24 CBC AWANA Registration Form

Parent(s) Name:			_Cell #:
Home Address:			
First Child's Name:			
Birth Date:	_Age:	_Grade:	
Second Child's Name:			
Birth Date:	_Age:	_Grade:	
Third Child's Name:			
Birth Date:	_Age:	_Grade:	
Fourth Child's Name:			
Birth Date:	_Age:	_Grade:	
Fifth Child's Name:			
Birth Date:	_Age:	_Grade:	
Current Church (If Applicable):			
Brought by:			
Parent's Email:			
Child's Email (If applicable):			

Capital Bible Hold Harmless Agreement

ATTENTION PARENTS Your child/children must be brought in by a parent/authorized person and picked up by a parent/authorized person inside Capital Bible Church. Legal Counsel has informed us that if you are not willing to follow this requirement, a HOLD HARMLESS AGREEMENT must be completed. Thank You.

We (parent's names) _____

Child's Printed Name

are permitting our child(ren) to enter Capital Bible Church at the start of AWANA by themselves, without a parent or authorized person. Our child(ren) may leave Capital Bible Church once the AWANA program is over without a parent or authorized person present. Capital Bible Church will not be responsible for the child(ren) once they leave the Capital Bible Church building.

Parent Printed Name	Parent Printed Name
Parent Signature	Parent Signature
Child's Printed Name	Child's Signature

Child's Signature

CBC Child Photo Release Form

Capital Bible Church has its own Facebook page! We would like photographs of church events to play a major role in the page content. Facebook is a way to communicate with the communities around us and get more people interested in the events at our church. Because Facebook can reach so many people, privacy is always a concern. The law states that a consent form must be attained from the official guardian before any photos of children (under the age of 18) are used by an organization.

By completing the form below, selecting to give or deny permission, and signing your name, you are telling Capital Bible Church whether we can use any photos taken during the AWANA program that may contain your child(ren) to be used on the Facebook page, church website, or in slideshows shown in church services. If you deny permission, Capital Bible Church will not post any photos that include your child(ren)'s face(s). This form is a safety precaution for you and the church, and an effort to operate within the law's standards and your preferences concerning your child(ren). Thank you.

l, _____ hereby

(parent/guardian)

GIVE MY PERMISSION FOR Capital Bible Church to use any photographs taken during any AWANA meetings/events that may contain my child (ren) for hosting on the Capital Bible Church Facebook page, Capital Bible Church website, or service slideshows in the future.

_ DO NOT GIVE MY PERMISSION FOR Capital Bible Church to use any photographs taken during any AWANA meetings/events that may contain my child (ren) for posting on the Capital Bible Church Facebook page, Capital Bible Church website, or service slideshows in the future.

Signature:	Data
Signature.	Date.
	Datt

Waiver of Liability/Permission Form

I (we) hereby give our permission for our son (s)/daughter(s):

1._____

2._____

3._____

4._____

To participate in the Capital Bible Church AWANA activity and will not hold the church or AWANA chaperones liable for any accident(s) which may occur. I (we) also agree that they will abide by the rules and dress code of the AWANA club.

Signed:	Date:		
Medical Releas	e		
Clubbers Name:			
1	-		
2	-		
3	-		
4	-		
If parent cannot be reached, emergency contact:			
Name:	Cell:		
I (we) understand that, in the event medical treatment to contact me (us). However, if I (we) or emergency co our permission to the staff or sponsor to secure the se provide the care necessary, including anesthesia, for	entact cannot be reached, I (we) give ervice of a licensed physician to		
Signed:	Date:		
Insurance Co:Gi	roup/Policy #:		
Please list any allergies, medication, medical problen	ns, or other information:		

CBC AWANA Sign In/Sign Out Form (Pickup Authorization)

All Parents must sign their child in on AWANA nights and must sign their child out at the end of the Club. We will do our best to be finished by 8:00 PM, we ask you to be please be here by that time. Your child will be kept in the gym until you come in to get them. For safety reasons, Capital Bible Church will only release a child(ren) to those individuals that have been designated by the child's parent(s) or legal guardian(s) as authorized to pick up the child. Legal counsel has informed us that unless a parent has secured an Order of Protection, both parents have the right to pick up the child. If an Order of Protection exists, Capital Bible Church must have a copy of the order. Capital Bible church must be informed of any individual(s) to whom the child SHOULD NOT be released to.

Children(s) names:

1	
2	
3	
4	
5	
The following person(s) are authorized to pick up my (our) child or children:
1	_Relationship:
2	_Relationship:
3	_Relationship:

4	Relationship:	
5.	Relationship:	

I understand that my child will only be released to the individuals listed above. I also understand that if circumstances change, it is my responsibility to notify Capital Bible Church and update the above list.

Parent Signature:	Date:
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