

Additional Fees: T-SHIRT (Truth and Training) or VEST (Sparks)

An Awana T-shirt or Vest must be worn at all meetings. There is a \$15.00 charge per item of clothing.

My child wears a: (Please circle correct size) **PAID** _____

Child:	Small	Medium	Large	XLarge
Adult:	Small	Medium	Large	XLarge

WORKBOOKS

An Awana workbook is used at all meetings. There is an \$8 charge per workbook. **PAID** _____

HEALTH INFORMATION

This information is extremely important. Please fill out this form completely.

Primary Care Physician _____ Phone _____

Current medication(s) and condition _____

Any limitations to your child's physical activities _____

Allergies: (medicine, food, plants, bees, etc.) _____

Insurance Carrier _____ Name of Issued _____

Insurance Policy # _____ Last Tetanus Shot _____

EMERGENCY AUTHORIZATION

As parent or legal guardian of (please print) _____, I hereby give consent to Trinity Lutheran Church and its representatives to provide all emergency medical or dental care prescribed by a duly licensed physician (MD) or dentist (DDS) for my dependant child. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of my child. I further direct that a photocopy of this form and my signature below are to be accepted as valid authorization for all emergency treatment. Concerted effort will be made to contact a parent/ guardian before any treatment is given and I/we assume all financial liability for services rendered.

Print Your Name

Signature

Date

DROP-OFF/PICK-UP AUTHORIZATION

These people have my authorization to pick-up or drop-off my child(ren) to and from AWANA:

Name

Phone

Name

Phone