

HEARTLAND E-FREE CHURCH  
 1620 19<sup>th</sup> Street  
 Central City, NE 68826  
 308-946-2595  
 AWANA REGISTRATION FORM 2018-2019 CLUB YEAR

**Registration Fee is \$10 for Puggles\* and \$20 for Cubbies, Sparks and T & T.**

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Emergency Contact (other than parent):

\_\_\_\_\_ Phone \_\_\_\_\_

Authorized Pickup (other than parent): \_\_\_\_\_

Child(ren) Information

Full Name	Gender	Date of Birth	Grade Level	Club (See Below)	Allergies
1.	M / F	/ /			Y / N
2.	M / F	/ /			Y / N
3.	M / F	/ /			Y / N
4.	M / F	/ /			Y / N
5.	M / F	/ /			Y / N

*Please make note of allergies, behavioral, medical conditions or other concerns on the back of this form.*

Club Groups Offered: **Cubbies** (1 to 2 years before K)    **Sparks** (K-2<sup>nd</sup> grade)    **T&T** (3<sup>rd</sup>-6<sup>th</sup> grade)

**Puggles\*** (2 & 3 yr)    *\*Volunteer Children Only*

I give Heartland E-Free permission to use pictures and/or video of my child on its website, Facebook page, or in any printed material

Parent's signature \_\_\_\_\_

# Parent/Guardian Notes

(We gather this information in order to provide the best possible experience for your child)

Please list allergies, behaviors, medical conditions and other concerns with child's name below.

**\*\*Allergies:**

**\*\*Behavioral Concerns:**

**\*\*Medical Conditions:**

**\*\*Other Concerns:**

Office Use Only

Updated or Uploaded to Realm.

Amount Paid: \_\_\_\_\_

Form of Payment: Cash / Check

Order Form Attached: Yes / No