

Bethel Baptist Church Awana Registration (one per child)

Feel free to make extra copies of this form



Child's Name _____ Birth Date _____

Check One:



Preschool:

- Age 3
- Age 4
- Age 5

- Kindergarten
- 1st Grade
- 2nd Grade

- 3rd Grade
- 4th Grade
- 5th Grade
- 6th Grade

- 7th Grade
- 8th Grade

- 9th Grade
- 10th Grade
- 11th Grade
- 12th Grade

Parent's Name(s) _____

Address _____ City _____ Zip _____

Phone _____ Cell Phone _____

Family Email _____ Church Attended _____

In case of an emergency and parents cannot be reached, please notify:

Name _____ Phone _____

Medical conditions or allergies we should be aware of _____

Doctor _____ Phone _____

Authorization to Consent to Treatment of Minor Initial

I/We the undersigned parent(s), of the above named child, a minor, do hereby authorize the hospital most accessible during the time of accident or illness, to perform any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medicine Practice Act on the medical staff of said hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

Authorization and Release of Liability Initial

I hereby consent to my child's on-going participation in various youth programs and events sponsored by the Church during the year. I intend for this consent to be applicable to any and all such programs and events that occur any time during the year. I hereby release and agree to indemnify and hold harmless the Church, its employees, volunteers, and other staff personnel, from any/all claims, demands, or causes of action which are in any way connected with my child's participation in events including claims against the Church based upon negligent acts or omissions.

Signature of Parent or Legal Guardian _____

Date _____