



Faith Chapel AWANA



Registration Form 2018-2019

(Please fill out one form for each child. Required for all including guests and visitors.)

Child's Name _____

Gender _____ Grade _____ Birthday _____

School _____

Mailing Address: _____

Parents' Names _____

Phone Number _____ Other Number _____

If I can't be reached at the above numbers, in case of emergency
please call: _____

Parents' Email: _____

Could we share AWANA photos including your child on Faith Chapel's social media? Yes / No

Allergies/Health Concerns: _____

Please share any other information that might help us work with your
child. _____

(Please check one.)

____ We regularly attend church at _____.

____ We regularly attend church at Faith Chapel.

____ We do not regularly attend church.

I give my child to participate in Faith Chapel's AWANA program.

Signature: _____ Date: _____