



2024-2025

FBC Westlake AWANA CLUBS Registration Form

Puggles

Cubbies

Sparks

T&T

\$30 New Club or \$20 Same club Registration Fee/One form per Child

Please Print
Child's Name: _____ Gender: _____
Birthday: _____ Age: _____ Grade: _____
Mailing Address: _____
Parent/Guardian Name: _____
Phone Numbers: _____
Who do you reside with: _____ Shirt Size _____
Email Address: _____
Church you attend: _____
Emergency Contact Name: _____ Phone: _____

First Baptist Church Awana Club Activity Permit Westlake, LA

TO WHOM IT MAY CONCERN:

As a parent &/or guardian, I do herewith authorize treatment under the direction of any licensed physician of the following minor _____ in the event of a medical emergency which, in the opinion of the attending physician, may endanger his or her life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after reasonable effort has been made to reach me by phone at the number listed above. The undersigned assumes the responsibility for any costs connected with such treatment and hereby releases First Baptist Church Westlake from any liability therefore. Date when release is intended: September 2024 through April 2025. This release form is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence.

SPECIFIC MEDICAL ALLERGIES, CHRONIC ILLNESSES, OR OTHER CONDITIONS:

Signature of Parent or Guardian: _____ Date: _____

Please let us know your preferences regarding our use of photos of your child.

YES, I grant First Baptist Church of Westlake permission to use photos of my child on the church website, on the Awana group church Facebook page, in the church newsletter or in other promotional materials.

NO, I do NOT want my child's photo to be used on the church website, on the church Facebook page, in the newsletter or in other promotional material.

