



Claremont Bible Chapel
432 W. Harrison St.
Claremont, CA 91711

2012 - 2013
Registration and Authorization Form
*for participation in AWANA activities and field trips
and for emergency treatment and transportation*

Personal Information:

Child's Name: _____ Boy ___ Girl ___

Street Address: _____

City: _____ State: _____ Zip: _____

Birthdate: (Month/Day/Year) _____ Grade: _____ Home Phone #: _____

Father's/Guardian's Name: _____ Cell #: _____

Mother's/Guardian's Name: _____ Cell #: _____

Email address (optional): _____

Where does your child regularly attend church? _____

Back-up emergency name: _____ Back-up phone #: _____

Emergency Information:

Please list any known allergies, current medications, medical needs or restrictions for your child.

As legal guardian, I authorize my child to participate in AWANA, and I authorize church personnel to transport my child to and from different AWANA meetings and events as needed.

I authorize church personnel to transport my child to a physician's office and/or emergency room for treatment in the event that emergency medical treatment is needed. Further, I authorize the physician and hospital staff to treat my child as they deem necessary in an emergency situation. This authority is granted only after a reasonable attempt has been made to reach me by phone at the numbers listed above.

I also understand that photos or videos which may include my child (taken during activities and events) may be placed on Claremont Bible Chapel's website (www.claremontchapel.org). Photos or videos will be placed on the website to allow both parents and children to see past activities and events which are taking place and enjoy those memories with family and friends. **Under no circumstance will anyone's name or personal information be uploaded to the website.** Please check the box below only if you DO NOT wish to have photos/videos including your child uploaded. I DO NOT give permission to use photos/videos of my child on the church's website.

Parent / Guardian Signature

Date

Print Parent / Guardian Name