

Parent/Guardian(s) _____
Last, First Last, First

Address _____

City _____ Zip Code _____ Brought By _____

Phone # during club (____)____-_____ Can rcv txt? Yes No (____)____-_____ Can rcv txt? Yes No

Email(s) _____

Church you regularly attend _____

Child 1	Name _____ Grade _____ Age _____ DOB ____/____/____ M ____ F ____ Medical Conditions _____ Allergies _____ Asthma? _____ <small>If yes, please bring prescribed inhaler to all AWANA club nights and events</small>	Office Use: Club: _____ Current Book: _____ Signed Waiver: _____ Dues Paid: _____
Child 2	Name _____ Grade _____ Age _____ DOB ____/____/____ M ____ F ____ Medical Conditions _____ Allergies _____ Asthma? _____ <small>If yes, please bring prescribed inhaler to all AWANA club nights and events</small>	Office Use: Club: _____ Current Book: _____ Signed Waiver: _____ Dues Paid: _____
Child 3	Name _____ Grade _____ Age _____ DOB ____/____/____ M ____ F ____ Medical Conditions _____ Allergies _____ Asthma? _____ <small>If yes, please bring prescribed inhaler to all AWANA club nights and events</small>	Office Use: Club: _____ Current Book: _____ Signed Waiver: _____ Dues Paid: _____
Child 4	Name _____ Grade _____ Age _____ DOB ____/____/____ M ____ F ____ Medical Conditions _____ Allergies _____ Asthma? _____ <small>If yes, please bring prescribed inhaler to all AWANA club nights and events</small>	Office Use: Club: _____ Current Book: _____ Signed Waiver: _____ Dues Paid: _____

DISMISSAL POLICY

In order to achieve the highest level of safety for your child(ren), a dismissal policy will be in effect for Wednesday nights at AWANA. Club ends at 8:15pm. Puggles, Cubbies, and Sparks will be released from their classrooms. Truth & Training will be released from the gym/fellowship hall. Clubbers will only be released to a parent, approved adult, or approved older sibling listed below. Please make eye contact or wave to a leader as you leave.

We realize some parents are in Bible study, Youth, etc. In the event that these activities run behind, a uniformed AWANA leader will escort your child to you.

Your children's safety is very important to us and your support and cooperation are greatly appreciated. Thank you for giving us the opportunity to love your children and for allowing them to be part of this ministry.

I have read and agree to the dismissal policy. _____

The following individuals will be allowed to pick up my child(ren) from club:

I participate in the following Wednesday night activity: _____

I have received the AWANA Club Standards (included in the Parent Information Packet) and understand that in registering my child(ren), I agree to abide by these guidelines set forth by the AWANA Club. I understand that abiding with these guidelines will help ensure the safety of all our AWANA Clubbers.

Parent / Guardian Signature: _____ Date: _____



RELEASE, CONSENT, WAIVER, AND INDEMNITY AGREEMENT

It is the intention of _____ (parent/guardian of minor/s) by this agreement to exempt and relieve Calvary Bible Baptist Church and its officers, agents, servants, or employees for personal injury, property loss or damage, or wrongful death of _____ (name/s of minor/s) caused by any act of negligence of Calvary Bible Baptist Church and its officers, agents, servants, or employees.

For and in consideration of permitting said minor(s) to observe, or use any facility or equipment of Calvary Bible Baptist Church, or engage in and/or receive instruction in any activity or activity incidental thereto some of which may involve dangers and risk of bodily injury at Calvary Bible Baptist Church in Westerville, Ohio: As the above minor(s)'s parent/guardian, I hereby voluntarily and absolutely release, discharge, waive, and relinquish any and all loss or damages or actions or causes of action for personal injury, property loss or damage, or wrongful death occurring to the above minor(s) as a result of the above minor(s)'s observing or using facilities or equipment of Calvary Bible Baptist Church, or engaging in or receiving instructions in any activities some of which may involve dangers and risk of bodily injury or in activities incidental thereto wherever or however the same may occur, and for whatever period said activities or instructions may continue.

The undersigned parent/guardian of the above minor(s) for him/herself, his/her heirs, executors, administrators, or assigns agrees that in the event any claim for personal injury, property loss or damage, or wrongful death shall be prosecuted against Calvary Bible Baptist Church or its officers, agents, servants, or employees, the undersigned parent/guardian will indemnify and hold harmless Calvary Bible Baptist Church and its officers, agents, servants, or employees from any and all claims or causes of action by above minor(s) or by any other person, entity, by whomever or wherever made or presented, and under no circumstances will the undersigned parent/guardian of above minor(s) present any claim against Calvary Bible Baptist Church and said persons for personal injuries, property loss or damage, wrongful death, or otherwise, caused by any act of negligence by Calvary Bible Baptist Church and said persons.

(Initial) The undersigned parent/guardian represents that he/she has read this release, that he/she assumes all risks associated with any potential dangers and risks of engaging in the observation, activities, or instruction offered, and that he/she is fully aware of and understands the terms and the legal consequences of the signing of this release. The undersigned parent/guardian intends his or her signature to be a complete and unconditional release of all liability to the greatest extent allowed by law and if any portion of the release is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

(Initial) I hereby **DO / DO NOT** grant permission of Calvary Bible Baptist Church to use my photograph, and that of above minor(s), on its website, Facebook page or in other official church printed publications without further consideration. I acknowledge the church has the right to crop or treat the photograph(s) at its discretion and that the church may choose not to use the photograph(s) at this time, but may do so at its own discretion at a later date. I also understand that once an image is posted on the church's website, it can be downloaded by any computer user anywhere in the world. Therefore, I agree to indemnify and hold harmless the church, its recognized leadership, its members and directors from any claims arising out of the use of photograph(s).

(Initial) I hereby **DO / DO NOT** grant permission for the above minor(s) to participate with Calvary Bible Baptist Church on their various events and outings. These events and outings range from concerts, camps, retreats, local recreational activities, and mission projects. I understand that a separate short form, which incorporates this consent therein, will be used for each particular event or outing to show that I have further consented thereto for the above minor(s) to travel with a representative of Calvary Bible Baptist Church.

(Initial) I consent to any x-ray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital care under the general or special supervision and upon the advice of or to be rendered by a physician and surgeon licensed under the Medical Practice Act for the above minor(s). This authority also extends to any x-ray examination, anesthetic, dental, or surgical diagnosis or treatment and hospital care by a dentist licensed under the Dental Practice Act for above minor(s). I further agree to pay all charges for the dental, medical, or hospital care or treatment. As the parent/guardian of the above minor(s), I am responsible for the healthcare decisions of the above minor(s) and I am authorized to consent to the services to be rendered. I represent that my consent to and agreement to pay for the dental, medical, or hospital care or treatment to be rendered to the above minor(s) is legally sufficient and that no consent from any other person is required by law.

X _____ Date: _____

SIGNATURE OF PARENT/GUARDIAN FOR _____ (name/s of minor/s)