



New Clubber Registration Form

Awana Club

First Baptist Church, Kingsland, GA

Name of child: Last _____ First _____ Middle _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home phone #: _____ Cell phone #: _____

E-mail address: _____

Name(s) of parent or responsible adult: _____

Where will the parent/adult be during club? _____

Grade (circle one): 2yrs K3 K4 K5 1 2 3 4 5 6 Birthdate: _____

Gender: Male/Female (circle one)

Church that you regularly attend: _____

Does your child have any food allergies or other special needs? If so, please describe:

Is there anything else we need to know? _____