









## AWANA at York Springs Foursquare

400 Main Street York Springs, PA 17372

## **Awana Club Registration Form**

Club Year: 2024-2025	- Please Print

	<u>ent/Guardian</u>		Nu	mber/E-mail ad	dress	Contact P	<u>'erson</u>
Name(s):Address:		Home Ph:					
		Work Ph:					
City							
_	nily Church:						
	sons (other than parents) authorized t	o pick up children:					
	, ,		Emergency*:	* Emergency Contac	t During Cl	uh Time (other	than parent/guardian)
O1 :							
Chi	d's Name (First. Middle. Last)	<u>Nickname</u>	<u>Birth Date</u>	<u>Gender</u> <u>Gra</u>	<u>de</u> <u>Sc</u>	<u>hoo</u> l	Other Info
		_					
		_					
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N/a	dical Info (allergies, medicines, special	acada)		Cor		Questions	
	ctor's Name & Ph:						
Dei	ntist's Name & Ph:					Off I	I ONLY
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Dei Ter	ntist's Name & Ph:	cipate in physical activ	vities such as those hel	d during Game mless from any	Regi		d: \$
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