

# AWANA REGISTRATION 2025-2026

## COMMUNION CHAPEL, EFCA

*Please complete this form to the best of your ability, sign it and bring it with you when you come to the Awana Meeting.*

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address(es) \_\_\_\_\_

Home Church \_\_\_\_\_

*Cubbies 3+, Sparks, Kinder-2<sup>nd</sup>, Truth & Train 3rd-6th, Trek 7<sup>th</sup>-8<sup>th</sup>, Journey 9<sup>th</sup>-12<sup>th</sup>*

Child's Name	Grade	DOB	Age	Club	Shirt Size.	Total
					Total Due	

**\*\*Please make checks payable to Communion Chapel with memo AWANA. \*\*All payments due at the time of registration.**

Registration fees for this year's AWANA program are \$40 per clubber for **all new participants** and **those advancing to a new club level** (e.g., moving from Sparks to TNT). This one-time fee covers the full 30-week program—just \$1 per week—and includes handbooks, uniforms, achievement patches, awards, and all administrative costs. **Returning clubbers** who remain in the same level will have a reduced fee of \$30. Payment plans are available to help ease any financial burden. Registration can be completed online.

I hereby grant my permission for my child(ren) to **participate** in scheduled and sponsored activities of Communion Chapel EFCA and the ministries of the church. I further authorize the person(s) in charge of the activity to **provide travel** to and from the activity and to **secure reasonable medical care**, for my child(ren) should such person(s) believe it necessary to do so, without receiving prior permission from me. I hereby **release** all persons in charge of or in attendance at the sponsored activities, as well, as Communion Chapel EFCA, its elders, pastors, staff and volunteers, from any liability arising out of any injury/illness to my child(ren) occurring while going to, participating in, or returning from such sponsored activity.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

# AWANA REGISTRATION 2025~~2026~~

## COMMUNION CHAPEL, EFCA

### AWANA REGISTRATION FEES\*

Cubbies, Sparks, Truth & Training, Trek, Journey.....

**\$40.00 per child** (New clubbers or those moving into a new club)

**\$30.00 per child** (for those clubbers returning to the same club as last year)

\*Registration fees include Entrance Booklet (if applicable), rank patches, all awards, and club administrative expenses.

---

### BOOKS

Cubbies, Sparks, Truth & Training, Trek, Journey ..... \$10.00 per book

---

### UNIFORM

Cubbies Vest.....	\$11.00 each
Sparks Vest.....	\$11.00 each
Truth & Training (3 <sup>rd</sup> -4 <sup>th</sup> ).....	\$16.25 each
Truth & Training (5 <sup>th</sup> -6 <sup>th</sup> ).....	\$16.25 each
Trek... 7 <sup>th</sup> -8 <sup>th</sup> .....	\$15.00 each
Journey (9 <sup>th</sup> -12 <sup>th</sup> .....	\$15.00 each

---

### OTHER ITEMS & REPLACEMENT ITEMS

Rank Patches.....	\$1.50 each
Cubbies Awards Patches.....	\$1.00 each
Cubbies Bag.....	\$7.00 each
Sparks Wings.....	\$1.50 each
Sparks Jewels.....	\$0.25 each
Sparks Handbook Bag .....	\$6.25 each
TNT Awards Emblem.....	\$1.00 each
TNT Sling Bag .....	\$9.00 each
TNT Ultimate Challenge Awards Emblems.....	\$1.00-1.50@
Trek Sling Bag.....	\$13.00 each
Trek T- Shirt.....	\$15.00 each
Journey – Shirt .....	\$15.00 each

Please make checks payable to Communion Chapel with memo to “AWANA”

# AWANA REGISTRATION 2025~~2026~~ COMMUNION CHAPEL, EFCA

## EMERGENCY CONTACT INFORMATION

Please list each child's name, severe allergies or medical conditions, and who is authorized to pick your child.

Child's Name	List severe allergies or medical condition(s) we should be aware of.	Authorized to pick-up child

**Emergency Contact Name** (other than parent or guardian): \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

### Photo/Video Release for Minor

I, as parent/guardian with legal responsibility for child(ren) listed on this form, hereby grant Communion Chapel the perpetual right to use photographs or videos taken of my child/dependant for any legitimate purpose without compensation to my child/dependent, myself, my or my child/dependant's heirs, executors, or assigns. Legitimate purpose may include, but are not limited to, advertising on the web, in newspapers. Magazines, internal publications, display prints, worship, services, special events, curriculum, etc.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



This section for office use only

Date	Check #	Item	Payment	Balance Due
------	---------	------	---------	-------------