

# Antelope Springs Church – AWANA Club 2022-2023

Family Name: \_\_\_\_\_

Father: \_\_\_\_\_ (First, Last)      Mother: \_\_\_\_\_ (First, Last)      Legal Guardian (if different): \_\_\_\_\_ (First, Last)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail (Required): \_\_\_\_\_ Name of Home Church: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance Provider: \_\_\_\_\_ Insurance #: \_\_\_\_\_ Doctor: \_\_\_\_\_

Phone: \_\_\_\_\_

Child's Name (First and Last Name)	Birthdate	Grade	Club	Book Level Ordered	Uniform Size Ordered	Medical Issues/Restrictions

To Whom It May Concern: As a parent and/or guardian, I do herewith authorize treatment under the direction of any licensed physician and the afore mentioned minor in the event of a medical emergency which, in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or in extreme discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me by phone at the numbers provided. By signing below, the undersigned assumes the responsibility for any costs connected with such treatment and hereby releases AWANA Clubs International, Antelope Springs Church of Roseville, CA, the vehicle driver of any vehicle driven if transport is part of the event, from any liability therefore.

**This Release Form is Completed and Signed of my own free will and authorizes medical treatment under emergency circumstances in my absence.**

This signature certifies that the information on this form is correct and current to the best of my knowledge. It is my responsibility to notify AWANA leadership if there are any changes in the information within this form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Antelope Springs Church 2022-2023 AWANA Price Worksheet

August 31, 2022 – May 10, 2023

## Annual Club Charge

Number of Children	Member Rate Antelope Springs Church (Member / Regular Attendee / Leader)	Guest Rate Attends Another Church
One	\$45.00	\$60.00
Two	\$80.00	\$95.00
Three	\$110.00	\$130.00
Four +	\$130.00	\$150.00

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<b>Club Charge</b>	
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## Books and Uniform Charges

	<b>Cubbies</b> 3 yrs – 5 yrs Pre-K	<b>Sparks</b> 5 yrs – 8 yrs K – 2 <sup>nd</sup>	<b>T&amp;T</b> 8 yrs – 11 yrs 3 <sup>rd</sup> – 5 <sup>th</sup>	<b>Trek</b> 11 yrs – 13 yrs 6 <sup>th</sup> – 8 <sup>th</sup>	<b>Journey</b> 13 yrs – 18 yrs 9 <sup>th</sup> – 12 <sup>th</sup>
Uniform	\$16.00 ea	\$16.00 ea	\$22.00 ea	\$15.00 ea	\$15.00 ea
Book	\$15.00 ea	\$15.00 ea	\$15.00 ea	\$14.00 ea	\$25.00 full year
Book Bag (optional)	\$9.00 ea	\$9.00 ea	\$17.00 ea	\$17.00 ea	\$17.00 ea

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<b>Uniform Total</b>	
<b>Book Total</b>	
<b>Book Bag Total</b>	

Donation to support Mike and Becky Sexton, our AWANA missionaries.  
(Suggested amount: \$10 x child)

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<b>Missionary Donation</b>	
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## Official Use Only

Payment Amount	Cash or Check #	Date	Receipt #	Bal. Due

<b>TOTAL DUE</b>	
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Cash or check payable to "ASC"