



Registration and Medical/Transportation Release Form

Circle one:



(3 - 4 years old)



(Kindergarten - 2nd grade)



(3rd - 6th grade)

To Whom It May concern: As the parent or guardian, I do herewith authorize the treatment by a qualified and licensed medical doctor of the following minor in the event of a medical emergency which in the opinion of the attending physician may endanger the life, cause disfigurement, physical impairment or undue discomfort if delayed. The authority is granted only after a reasonable effort has been made to reach me. I also release Faith Fellowship, other organization(s) and individual(s) involved of any liability for accident incurred during any of the 2011-2012 AWANA Club activities.

Table with 4 columns: Name of Minor, Birth Date, Address of Minor, Grade, City, State & Zip of Minor

This release will be used during the entire year, September 2011 through September 2012. This includes both club meetings and transportation to and from outings (i.e., AWANA Games, Sparks-a-rama, Bible Quizzing, Club Hikes, etc.) This release form is completed and signed of my own free will and with the sole purpose of authorizing medical treatment under emergency circumstances in my absence.

Table with 2 columns: Parent or Guardian Name, Phone or Cell Number, Address (if different), Email Address

Signed: _____ Date: _____

INSURANCE AND MEDICAL INFORMATION

Table with 4 columns: Medical Carrier, Subscriber, Social Security #. or Subscriber ID #, Medical Group (Employer Name or Number), Family Physician, Phone Number, Physician Address, Specific Medical Allergies, Chronic Illness or Other conditions, Date of Last Tetanus Shot

ALTERNATE CONTACT IN CASE OF EMERGENCY

Table with 2 columns: Name, Phone or Cell, Address, Relationship to Minor

ALTERNATE PEOPLE WHO MAY PICK YOUR CHILD UP FROM AWANA

Name	Phone #	Relationship to Minor

PEOPLE WHO MAY NOT PICK YOUR CHILD UP FROM AWANA

Name	Would minor willingly go with them?	Relationship to Minor

FAITH FELLOWSHIP 8201 Moody Avenue, La Palma, CA 90623 Phone: (714) 952-8422