

Chinese for Christ Church of Hayward  
22416 Meekland Ave., Hayward, CA 94541  
Tel: (510)581-1630, Web:cfcchayward.org

## 2009 AWANA Program Registration

Name of Child: \_\_\_\_\_

Birthday: \_\_\_\_\_ Grade (starting September 2009): \_\_\_\_\_

Name of Parents or Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail (if available): \_\_\_\_\_

T-shirt size \_\_\_\_\_ (if new comer)

Registration Fee \$35 (For the whole school year); Amount Paid: \_\_\_\_\_

### Permission / Release Form

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Medical Plan \_\_\_\_\_ Policy No. \_\_\_\_\_

Allergy: Yes \_\_\_\_\_ No \_\_\_\_\_ Food Allergy \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

### Emergency Medical Authorization:

I hereby consent to have my child participate in all AWANA activities supervised by the leaders of CFC Church of Hayward either at church or away from church grounds to nearby points of interests. I hereby authorize the leaders of CFC to call emergency ambulance in case of an accident or acute illness, and to arrange for necessary emergency medical care. I also agree to accept responsibility for any cost connected with such treatment and hereby release CFC from any liability.

Parent's signature: \_\_\_\_\_ Date \_\_\_\_\_

AWANA will resume in session on Friday, September 11, 2009 .

The Program is on **every Friday (except those notified otherwise) 8:00PM~9:30PM with many special activities throughout the school year.**