



Pine Grove Community Church

2024 – 2025 Family Registration Form for Awana and/or Youth Group

NOTE: Only ONE form is needed PER FAMILY. Please return form to an Awana Leader or Church Office when completed.

Information provided will be used by Pine Grove Community Church’s Awana/Youth Group/Staff only.

Parent(s) or Legal Guardian(s): _____ Email: _____
(Last name of parent/guardian) (First name(s) of parent/guardian)

Address: _____ City: _____ State: _____ Zip: _____

Phone: Primary Phone # (_____) _____ Mother Cell # (_____) _____ Father Cell # (_____) _____

Yes No *Photos of my child may be taken for posting on the church bulletin board, local newspaper articles, PGCC website, PGCC Facebook and/or other ministry-related purposes.*

Please check the programs below that your child(ren) will attend

Child’s First Name (and last name if different)	M	F	Age	School Grade in 2024-2025	Date of Birth	Awana			Youth	
						Awana Cubbies 3–5 years (K-4)	Awana Sparks (Grades K5-2)	Awana T&T (Grades 3-5/6)	Youth Group (Grades 6-8)	Youth Group (Grades 9-12)

IMPORTANT: Please Turn The Page To Complete The Form. Thank you!

Please list any medical conditions, allergies or special instructions for the care of your child:

<i>Child's Name</i>	<i>Medical Condition, Allergies or Special Instructions</i>	<i>Other comments</i>

Awana Clubs (Preschool-Grade 5/6):

Emergency contact name (other than parent/guardian) _____ Phone/Cell # _____ Phone/Cell # _____

In case of emergency: If unable to reach parent/legal guardian by phone, may the PGCC or Children's/Student Ministry staff seek medical attention for your child? Yes No Instructions if "No" _____

Family Doctor: _____ Clinic/Hospital _____ Phone # _____

Awana children will be released only to the person(s) signing this form & those listed below unless written consent is given. Please list the names and relationships of one/two persons authorized to pick up your child for you.

Name: _____ Phone/Cell #: _____ Relationship: _____

Name: _____ Phone/Cell #: _____ Relationship: _____

Print Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date

Youth Group (Grades 6-12):

I, _____ hereby give my child(ren) _____ permission to participate in all Student Ministry activities. I understand that there may be activities which may require transportation to and from another area. I give permission for my child to ride with an approved driver.

Signature of Parent/Guardian: _____

Date: _____

*****Please Return Completed Form To An Awana Leader or the Church Office*****