



Register for Awana now!
Sundays, 5:30-7:00 pm

PARENT SIGNATURE and **ALL** information **MUST** be included with registration.

Handbook \$10 Uniform \$10

Make checks payable to PSBC (Financial Assistance available)

Child's Name	Tee Shirt Size	Current Grade	Age in Years	Child's Birthdate	Known Allergies/Medical Notes

Home Address: _____ City/State: _____

Zip: _____ Parent's Name(s) _____ Home # _____

Cell # _____ Email Address _____ (Awana info updates will be shared via email)

Does your family have a church home? Yes No
 If no, may we contact you with information about our church and programs for your family? Yes, please call No, please don't call

RELEASE OF LIABILITY, PHOTO RELEASE, AND CONSENT TO MEDICAL TREATMENT

1. **Release of Liability.** I, for myself, my minor child, and for the child's other parent and/or guardian, hereby release, waive, discharge, and covenant not to sue Pendleton Street Baptist Church and its officers, directors, employees, agents, volunteers, heirs, and assigns of from all liability, loss, claims, demands, possible causes of action, court costs, attorneys' fees and other expenses arising from any lawsuit that may otherwise accrue from any loss, damage, or injury to my child's person or property in any way resulting from or connected with my child's attendance at Awana, including, without limitation, the failure/of anyone to enforce rules and regulations, failure to make inspections, or the negligence of other persons.
2. **Photo Release.** I give permission for my child's photo, which may be taken during Awana, to appear in church publications. I give permission for my child's photo and/or video, which may be taken during Awana, to appear on the church website, www.psbccgreenville.org.
3. **Consent to Medical Treatment.** In the event my child becomes ill or injured, I give my permission for a representative of Pendleton Street Baptist Church to take whatever steps are reasonably necessary to render emergency first aid to my child. I also consent to such emergency medical treatment as may be reasonably necessary to ensure the health and welfare of my child including, but not limited to, x-rays, anesthetic, medical or surgical diagnosis and treatment, hospital care and administration of drugs or medicine under the care of a licensed physician and/or surgeon.
4. **Awana Contact Permission Authorization.** Occasionally your child's handbook leader would like to contact you and your child to see how he or she is enjoying club and if he or she needs any help in completing the handbook assignments. Your child's handbook leader would also like to send written correspondence such as "Get Well" cards and a "Birthday" card. By signing below as the legal parent/guardian, you are giving your child's handbook leader written permission to contact you and your child by written communication and by telephone to discuss club activities.

EMERGENCY INFORMATION

#1 Contact _____ Relationship to Child _____ Phone # _____

#2 Contact _____ Relationship to Child _____ Phone # _____

Signature of Parent/Guardian (REQUIRED)

Signature: _____ **Print name:** _____ **Date:** _____

Mail to: Pendleton Street Baptist Church, 1100 S. Main Street, Greenville, SC 29601
Fax to: (864)232-7313 **Call:** (864) 232-7312 **Web Address:** www.psbccgreenville.org