Awana Leader Registration

LEFBC Awana Club 17 Peter Court

- Please Print -

Club Year: 2017-2018 Mineville, NS B2Z 1K2 Phone / E-mail Address Contact Person Leader's Name: First / Last: Cell Phone: Address: E-Mail: State: Home Phone City: Zip: Birth Date: Work Phone: (the year will be kept private) Male Female Other: Gender: Home Church: Emergency: Awana Service History (example: Sparks Leader from 9/2004 to 9/2006 at East Madison Baptist Church) Club (e.g. Sparks) Role (Director, Leader, etc) Dates or Club Years Church Name Note (example: Cubbies Basic Training Completed 8/2007) **Training History** Medical Information (use the back of this form if needed) Description of Training / Events Date Note Allergies / Conditions / Special Needs or Concerns **Service Opportunities** What groups of children do you prefer to work with? __ Nursery __ K-2nd Gr __ 3rd-6th Gr What Leadership Roles are you interested in? __ Game Director __ Music __ Recordkeeping __ Council Time __ Special Events __ Other: _ **Terms and Conditions** Office Use I certify that I meet the qualifications of a leader as set out in the LEFBC AWANA Policies: Team Color ___ 1. One must profess to be a believer and follower of Jesus Christ, and live in accordance with that profession Uniform Size by the Word of God 2. One must have gone through the process of background checks according to the child protection policy of LEFBC. 3. One must be able to fulfill the time commitments for the position and responsibilities given. 4. One must be approved by the Commander, the directors, and the pastors of their church. 5. One must complete the AWANA training as determined by the Commander and directors. I have read and agree to the Terms and Conditions stated above

Date

Signature of Leader