



CORNERSTONE
Bible Fellowship

36300 Center Ridge Rd. North Ridgeville, OH 44039

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Register me for AWANA 2023-24!

Please fill out the following form and mail or drop off at Cornerstone Bible Fellowship. Our AWANA program is open to children ages 2 years– 12th grade and takes place on Tuesday nights during the school year from 6:45-8:15pm.

Child's Name	Gender	Date of Birth	Grade '23 -'24	Allergies/Medical Concerns
	M F			
	M F			
	M F			
	M F			

Address _____ City _____ Zip Code _____

Mom/Guardian Name _____ Cell Phone _____

Email Address _____

Dad/Guardian Name _____ Cell Phone _____

Email Address _____

Emergency Contact _____ Phone _____

Please list friends of your children, so we can attempt to place them in groups together: _____

Policy Agreement

I acknowledge that participation in the activity described above involves risk to the participant(s). In consideration for the opportunity to participate in the activity described above, I, the parent/guardian, acknowledge and accept the risk of injury associated with participation in and any transportation to and from the activity. I accept personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for any medical treatment rendered to the participant(s) that is authorized by the church sponsor or its agents, employees, volunteers, or other representatives.

Parent Signature _____ Date _____

Permission to Use Photograph

I grant Cornerstone Bible Fellowship (CBF) of North Ridgeville, Ohio, the right to take photographs of me and my family in connection with activities sponsored by CBF. I authorize CBF its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that CBF may use such photographs of me and my children without our names for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content. CBF will not use names of minors in print or electronically without additional consent from parent/guardian.

Parent Signature _____ Date _____