



AWANA Leader and LIT Registration

Leader Name _____ Year 200__ - ____

Address _____ Apt. _____

City _____ State _____ Zip _____

Phone # () _____ Cell # () _____

Email _____ Birthdate _____

Are you a youth leader in training (LIT)? Yes No

Which club do you prefer or have been assigned to? *Circle one*

Cubbies (3 & 4 year old) Sparks (K-2nd) T & T (3rd -5th)

Trek (middle school) 24-7 (high school) any age

Position: Commander Director Leader Game Leader Secretary Worship Leader

Other _____

How many years have you been an Awana Leader (include this year)? _____

What Church do you attend: _____ Pastor's Name: _____

Please provide name and phone numbers of two personal references:

_____ and _____

Have you ever been convicted of a felony? Yes No

If yes, please explain (include the date):

Please write or attach your testimony on the backside of this form.

Signature _____ Date _____

Thank you for giving your time to Awana and the children. Without you, this ministry would not be able to reach the children of our community with the gospel of Christ.

