

Awana Clubs™ Contact Companion Card

Clubber's name: _____

Parent's name: _____ Leader/Team: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone number: (_____) _____

Clubber age: _____ Clubber grade: _____ Clubber birthday: _____

Club attendance year: 20_____

| September | October | November | December | January | February | March | April | May | June | July | August |
|-----------|---------|----------|----------|---------|----------|-------|-------|-----|------|------|--------|
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Awana Product Number 66658

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