

2018-2019
Adventurer
Secretary
Packet



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Important information to remember:

1. Submit Certification Application forms no later than **October 10, 2018**
2. Mail, fax or deliver the individual monthly reports by the **10th of each month.**
3. Be sure each staff member and volunteer has a copy of the **GUIDELINES FOR VOLUNTEERS** and a **copy of the Volunteer Ministry Information (VMI) form** to complete. **They may keep the GUIDELINES, but return** to you in a sealed envelope **the VMI form**. The still sealed envelope is mailed with the other Certification Application forms to the Youth Department.

Certificate of Charter And Yearly Awards

All Arizona Conference clubs must apply for the Certification of Operation. The following forms need to be in the office by October 10th as the information must be submitted to Adventist Risk Management for insurance purposes.

Club Certification Application

Director's form

Adventurer Membership List

(Do not send Adventurer Applications)

Yearly Staff Form

Volunteer Ministry Information Form for EACH Staff member (confidential)

Please mail the above forms directly to:

Arizona Conference of Seventh-day Adventist

Adventurer Ministries

P.O. Box 12340

Scottsdale, AZ 85267

The Awesome A's Award, the Adventurer Achievement Award, and the Adventurer Appreciation Award will be presented during the concluding ceremonies at the Adventurer Family Retreat.

The **Awesome A's Award** will be given to any club that fulfills the following requirements before the end of March:

1. The club must have a ***Certificate of Charter***.
2. The club ***report forms*** are submitted to Arizona Conference Youth Ministries by the 10th of each following month.
3. The club must be represented at the ***Adventurer Leadership Convention***.
4. The club must attend the ***Adventurer Fun Day***.
5. The club must have an ***Induction Service, Adventurer Sabbath, and Investiture Service***.
6. The club must have at least ***four Family Network Meetings***.
7. The club must have at least ***one Community Outreach*** project.
8. The club must have at least ***two club meetings each month***.

Club Charter Application: Part 1

2018-2019

We resolve to always plan and operate our club to honor and glorify God, and we realize that the primary purpose of Adventurers is to lead children to Jesus, to teach them to love Him, and to serve Him.

We understand that the club is for the salvation, benefit and enjoyment of children. We will follow Church policies and cooperate with church leaders. We will work in harmony with our sponsoring Church to make the club a soul-winning and witnessing program.

Enclosed is the following:

1. Yearly Staff Registration Form completed and attached.
2. Yearly Adventurer Membership Form completed and attached
3. Club meets (frequency) _____ on (day) _____ at (time) _____ AM/PM at (location) _____
4. One Volunteer Ministry Information (VMI) form is included for EACH staff member.

Just a reminder: At any of the Conference planned events, individual's health insurance should be primarily considered, (This information will be on your medical consent form that the parent fills out at registration). Full coverage should be carried on any auto used to transport club members.

Club Director:

The (club name) _____, sponsored by the (city, church name) _____ hereby applies for Conference Certification for the Adventurer year _____. We pledge to keep Arizona Adventurer's standards high.

Local Adventurer Director Signature

Date

Local Pastor/ Elder

Date

*Important: Send only if the form has been fully filled in and with the two required signatures.
Mail to Adventurer Ministries: P.O. Box 12340, Scottsdale, AZ 85267*

Arizona Conference Youth Ministries

Club Charter Application: Part 2

Director's Name _____

Club Coordinator _____

Club Name _____

Church Name _____

Daytime Phone: _____ Cell Phone: _____

Mailing Address: _____

City/State/Zip: _____

Street Address (if different): _____

FAX Number (if available): _____ Birthday: _____

E-mail: _____

Once we receive this completed form with the completed Certification Application packet fully filled in, your name will automatically be placed on our e-mailing list. Please mail to:

Arizona Conference Adventurer Ministries
P.O. Box 12340
Scottsdale, AZ 85267
Phone: 408-991-6777 ext. 125

Important: Send only if the form has been completely filled in and with the two required signatures.

Club Charter Application: Part 3

Adventurer Yearly Staff Form

This page must be submitted, with complete Certificate of Charter Application, to the Arizona Adventurer Ministries Department to receive your certification.

The following individuals are presently working as officers and staff of our club and desire to be registered with the Arizona Conference for the Adventurer Year of 2018-2019.

Club Name: _____

Church: _____ Director's Name _____

No.	Staff Name	Complete Address	Title	MG Y/N	Srv Yrs
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
				MG	Srv

No.	Name	Complete Address	Title	Y/N	Yrs
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					

Title: Director, Assistant Director, Secretary, etc.

MG: Write "Y" if person is a Master Guide, and "N" if not.

Srv Yrs: Write number of years serving in Adventurers or Pathfinders.

Club Charter Application: Part 4

Adventurer Membership List

The following individuals are presently enrolled as members of our club and desire to be registered with the Arizona Conference for the Adventurer Year of 2018-2019.

Club Name: _____

Church: _____ Director's Name _____

Adventurer	Birthdate	Current Class
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
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40		

Club Charter Application 5 / GUIDELINES FOR VOLUNTEERS

Because our society is filled with pain, problems, and litigation caused by improper conduct of adults working with children and youth, it is imperative that those working with children in the churches have meaningful guidelines for conduct—to protect both themselves and those under their care. As a ministry volunteer, you want parents and others to feel comfortable and confident with you. Here are some practical guidelines:

1. Never leave a child or group of children for whom you are responsible unattended.

Provide adequate supervision at all times, no matter what.

2. ALWAYS have at least one other adult 18 or older with you when ministering to children. If you find yourself in a situation where you are the only adult present, UNDER NO CIRCUMSTANCES should you allow yourself to be alone with one child. You will need to find another person (which they do not have to be an adventurer leader) and then continue.

3. Always ask a person's permission before touching him/her anywhere, even when responding to an injury or problem. This is especially true for any area that would normally be covered by a T-shirt and/or shorts. If an injury is within this area, make sure another adult works with you as you provide care.

4. Physical and verbal attacks are inappropriate and should never be used as discipline. "Time out" or "sit in that-chair" may be helpful methods with children.

5. Children need to be touched appropriately. However, keep hugs brief and "shoulder-to-shoulder" or "side to- side." Always keep your hands at (not below) the shoulder level. A caregiver kiss is to the forehead or cheek only—not elsewhere. For small children who like to sit on laps, encourage them to sit next to you.

6. When taking small children to the bathroom—take another adult along, or leave the door open.

Be aware of the signs and symptoms of abuse; be aware of the legal requirements in your locality for reporting child abuse. In nearly all places, a caregiver can be held legally responsible for failing to report suspected or actual child abuse.

Be loving, kind, firm, and always thoroughly professional as a caregiver. Working with children and youth at church is not only a privilege; it is also a deep responsibility that must be approached with utmost care. As a volunteer you are expected to participate in orientation and training programs conducted by the church or conference.

Adventist Risk Management and the North American Division recommend the following rules for leaders. These serve as a protection to you and to your ministry against charges of abuse:

- **You must complete** "Verified Volunteer" online at www.verifiedvolunteers.com. Please contact your church for further information regarding this online Child Safety Training.
- **The six-month rule.** Do not recruit a volunteer who has been a church member for less than six months.
- **The two-person rule.** Have at least two adults present at all times.
- **The glass window rule.** If the door to a classroom does not have glass in or around it, the door should be left open, so that the teacher is in full view.

I, the undersigned, have read the guidelines listed above and agree to abide by them. My director will keep this original and I will keep a copy of this signed form for reference.

Volunteer's Signature

Date Signed

Complete VMI form to be sent to Youth Department

Aplicación de Club 5/GUIA DE PROCEDIMIENTO PARA VOLUNTARIOS

Debido a que nuestra sociedad está llena de dolor, problemas y demandas legales causados por la conducta inapropiada de adultos que trabajan con niños y jóvenes, es imperativo que quienes trabajan con niños en las iglesias tengan pautas de conducta para protegerse a sí mismos y a aquellos bajo su cuidado. Como voluntario del ministerio, usted quiere que los padres y otros se sientan cómodos y confiados con usted. Aquí hay algunas pautas prácticas:

1. **Nunca deje a un niño o grupo de niños bajo su cuidado desatendidos.** Proporcionar una supervisión adecuada en todo momento.
2. **SIEMPRE** tener a otro adulto de 18 años o mayor con usted al estar con los niños. Si usted se encuentra en una situación donde usted es el único adulto presente con los niños, BAJO NINGUNA CIRCUNSTANCIA debe quedarse solo con un niño. Busque a otra persona lo más pronto posible (no tienen que ser un líder de clubes) y luego continuar.
3. **Siempre pida el permiso de una persona antes de tocarlo** en cualquier lugar, incluso cuando responda a una lesión o problema. Esto es especialmente cierto para cualquier área que normalmente estaría cubierta por una camiseta y/o pantalones cortos. Si una lesión se encuentra dentro de esta área, asegúrese de que otro adulto este presente mientras usted da atención médica.
4. **Los castigos físicos y abusos verbales son inapropiados** y nunca deben usarse como disciplina. "Tiempo fuera" o "sentarse en esa silla" pueden ser métodos útiles con los niños.
5. **Los niños necesitan ser tocados apropiadamente.** Sin embargo, mantenga los abrazos breves y "hombro a hombro" o "lado a lado". Siempre mantenga sus manos en (no debajo) el nivel del hombro. Un beso protector es sólo en la frente o mejilla, no en otra parte. Para los niños pequeños que les gusta sentarse en las piernas, animarlos a sentarse a su lado.
6. **Cuando lleve a los niños pequeños al baño-** lleve a otro adulto o deje la puerta abierta.

Esté atento a las señales y síntomas del abuso; Tenga en cuenta los requisitos legales en su localidad para reportar abuso infantil. En casi todos los lugares, un cuidador puede ser considerado legalmente responsable por no reportar sospecha o abuso infantil real.

Sea amable, firme y siempre sea profesional como líder. Trabajar con niños y jóvenes en la iglesia no es sólo un privilegio; También es una responsabilidad importante que debe desarrollarse con el máximo cuidado. Como voluntario, se espera que usted participe en programas de orientación y entrenamiento conducidos por la iglesia o conferencia.

Adventist Risk Management y la División Norteamericana recomiendan las siguientes reglas para los líderes. Estas sirven como protección para usted y para su ministerio contra cargos de abuso:

- Usted necesita llenar la solicitud titulada "Verified Volunteer" en línea www.verifiedvolunteers.com. Favor de preguntar a su Pastor de iglesia si necesita más información.
- La regla de seis meses. No invite a una persona a ser voluntario que sea recién bautizada o que tiene menos de seis meses como miembro de iglesia.
- La regla de dos personas. Tener al menos dos adultos presentes en todo momento.
- La regla de la ventana. Si la puerta del aula no tiene vidrio o ventana, la puerta debe dejarse abierta, de modo que el líder está a plena vista.

Yo, el firmante, he leído las guías mencionadas arriba y acepto cumplirlas. Mi director mantendrá este original y guardaré una copia de este formulario firmado para referencia.

Firma de voluntario

Fecha firmada

Llene la forma VMI y mándelo al departamento de Jóvenes

Arizona Conference of Seventh-day Adventists

Volunteer Ministry Information Form (VMI)

Fill out and mail to: Youth Ministries

P.O. Box 12340
Scottsdale, AZ 85267

Office Use Only

Approve Disapprove

Conference Youth Director Signature

SECTION I

PERSONAL RECORD

Name _____ Birthdate _____

Address _____ City _____ St _____ ZIP _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

Church _____ Club _____

Marital Status: Single Divorced Married Name of Spouse _____

Children: <u>Name</u>	<u>Birthdate</u>	
_____	_____	Have you been a/do you have: Pathfinder YES NO Master Guide YES NO PIA YES NO PLA YES NO
_____	_____	
_____	_____	
_____	_____	

If you been a Pathfinder: Where? _____ When? _____

SECTION II

HEALTH HISTORY

Do you now have, or have you had, any injury/sickness that might limit your involvement in Pathfinder activities?
 YES NO If yes, how would it hinder? _____

SECTION III

EDUCATIONAL RECORD

Highest level of education _____

Degree/Diploma held _____

School granting degree/diploma _____

Year degree/diploma received _____

College major/minor _____ / _____

SECTION IV

EXPERIENCE

Please list all experience (Pathfinder/Adventurer, Scouting, Sabbath School, etc.) that might qualify you for Adventurer leadership.

Position/Type of Work	Church/Organization	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SECTION V**HONOR INSTRUCTION ABILITY**

Please list the honors/crafts which you are interested in teaching

Circle: T – Capable of teaching

Honor/Craft

Honor/Craft

A - Able to assist

I - Interested in learning to teach

_____ T A I

_____ T A I

_____ T A I

_____ T A I

_____ T A I

_____ T A I

_____ T A I

_____ T A I

SECTION VI**UNLAWFUL CONDUCT**

Note: This section will remain in a confidential file at the conference office and will be available only to the conference administration and youth department staff. If the volunteer moves, and another conference asks for this form it will be forwarded to the conference youth department of the volunteer's new residence.

Have you been formally (or informally) accused, charged, or disciplined for any unlawful sexual conduct, child abuse, and/or child sexual abuse? YES NO

Date _____ Place _____

Type of Conduct _____

SECTION VII**REFERENCES**

List below three individuals who could recommend you for service in Adventurer/Pathfinder ministries

Name	Street	City/State	Zip	Phone
Pastor				
Other				
Other				

SECTION VIII**STATEMENT OF ACCURACY**

The above information is accurate to the best of my recollection. I understand this is a strictly "volunteer" position and I will receive no remuneration for services and time volunteered.

Volunteer's Signature

Date

Note: Please be sure you have answered every question and signed your name above. Send this directly to the Youth Department at the address listed on the front of the page.

PURPOSE

It is the goal of every Adventurer/Pathfinder Club to have the best qualified personnel available for his/her church. This record becomes the property of your local church conference Youth ministries department and will be used to evaluate all present and prospective youth workers and volunteers. Volunteer Data Sheets will be forwarded to another conference's youth department should the volunteer move to another conference.

PROTECTION

Understanding the epidemic proportion of child abuse and unlawful conduct, Section VI has been included to protect children in church sponsored programs from any abuse by any staff with a history of misconduct. The confidentiality of volunteers will be respected while also protecting parents, youth ministries workers, and the church organization.

PROCEDURE

If the Youth Ministries Director recommends the applicant, Sections I through V will be copied and sent to the local church for their record and will be used to determine staff qualification. When a local church requests a recommendation from a local conference's Youth Ministries Director, the director may not release any specifics and may only respond with "recommended", "not recommended" or "recommended with conditions noted."

POLICY

All information on this Youth Ministries Volunteer Data Sheet is required by North American Division and Insurance policy. It will become a permanent record and should include updates every year. In the event of accusations against applicant, opportunity should be given for response by the accused. This response also becomes a part of the record.

Monthly Reports

2018-2019

This Section includes:

- Monthly Reports- DUE ON THE 10th OF EVERY MONTH
- Monthly News- OPTIONAL (if you have something to share please fill out)
- Community Outreach Report- SUBMIT AT LEAST TWICE A YEAR
- Family Networking Meeting Report- MINIMUM FOUR TIMES A YEAR (ideally every two months)

Esta Sección incluye:

- Reporte Mensual- ENTREGUE CADA 10 DEL MES
- Noticias Mensuales- OPCIONAL (si tiene algo que compartir por favor llene el documento)
- Reporte: Alcance a la comunidad- ENTREGUE POR LO MENOS DOS VECES AL AÑO
- Reporte: Reunión de Red Familiar- MINIMO CUARTO VECES AL AÑO. (idealmente que se haga cada dos meses)

At the end of each month *Monthly Report* AND *Monthly News* need to be sent to the Arizona Conference Youth Ministries at
P. O. Box 12340

Scottsdale, AZ 85267

or

FAX: 480-991-4833

Please be prompt. There is no credit for those received 30 days late.

Arizona Adventurer Club

Monthly Report

Club Activities: Please write the date you did this activity during THIS month

O Basic/Advanced Staff Training _____

#full time attendance ____ #part time attendance ____

O Club Registration _____

O Club Charter Application Complete & Submitted _____

O Adv. Director's Meeting _____

O Adventurer Fun Day _____ station? O Yes ONo

O Induction Ceremony _____

O Adventurer Sabbath _____

O Adventurer Blessings Service _____

O Investiture Ceremony _____

O Adv. Club Evaluation (Self) _____ (w/Coordinator) _____

O Field Trips/Camping _____
Activity _____

O Club Community Outreach _____
Activity _____

O Adventurer Family Retreat _____
station/activity at Family Retreat Oyes Ono

O Arizona Conference Adventurers Facebook contribution
(<https://www.facebook.com/AZAdventurers>)

O Adv. Staff Meetings # _____ % attendance _____

O Family Network Meeting _____

Awards Completed

Club Name: _____

Director: _____

Preferred Contact Information:

Number of Adventurer Club Meetings
duly-called, with/without uniform
_____ Average attendance _____%

Address:

usually meet on (day)

_____ - _____ () a.m. () p.m.

Enrollment:

Families: __ SDA __ Non SDA

___ Baby Birds ___ Curious Cubs

___ Little Lambs ___ Eager Beaver

___ Busy Bee ___ Sunbeam

___ Builder ___ Helping Hand

Month: _____

Year: _____

Arizona Adventurer Club

Monthly News

O Club News: Tell us what you have done this month.

O Club Announcements: Tell us about your upcoming activities or information you would like to share with others. (i.e., special events, fundraisers, fieldtrip contact info, etc.)

O Prayer Requests: Anything you would like to inform our Adventurer family to pray about.

Month: _____

Year: _____

Arizona Adventurer Club Community Outreach Report

Club Name: _____

Director: _____

Name of Activity _____

Explanation of Activity _____

Report:

Where the activity took place: _____

Number of Families Reached: _____ SDA _____ Non SDA _____

Literature Distributed: Yes _____ No _____ Name of Literature _____

Cash contribution: Yes _____ No _____ Clothing contribution: Yes _____ No _____

Other contribution: Yes _____ No _____ Time spent on project/activity: _____

How has this project impacted your Adventurers?

Month: _____

Year: _____

Arizona Adventurer Club Family Network Meetings Report

Club Name: _____

Director: _____

Date of Activity: (Please indicate the corresponding month you are reporting for and write the date that activity took place during that month.)

October _____ December _____ February _____ April _____
 Other _____

Name of Activity _____

Description of Activity _____

Where the activity took place: _____

Number of Families Reached: _____ SDA _____ Non SDA _____

Literature Distributed: Yes _____ No _____ Name of Literature _____

Attendance: Club Families _____ % Non Club member families _____ %

Did you organize this activity or did you work with another organization and/or church ministry?

No Yes; which? _____

How did this meeting impact the families involved? _____

Month: _____

Year: _____

Reporte Mensual

Club de Aventureros de Arizona

Actividades del Club: Por favor escribe la fecha en que hizo la actividad ESTE mes.

O Entrenamiento de Personal Básico/Avanzado

#full time attendance ____ #part time attendance ____

O Inscripción de Club _____

O Aplicación de Certificación del Club Completa y Entregada

O Reunión de Directores _____

O Día de Diversión _____ ¿estación? OSÍ ONo

O Ceremonia de Inducción _____

O Sábado de Aventureros _____

O Regalo de Bendición _____

O Ceremonia de Investidura _____

O Evaluación de Club (Propia) _____ (c/Coordinador) _____

O Campamento/Paseo _____

Actividad _____

O Actividad de Alcance a la Comunidad _____

Actividad _____

O Retiro Familiar de Aventureros _____

estación/actividad en el Retiro OSÍ ONo

O Contribución a la página de Facebook de Aventureros de la Conferencia de Arizona

(<https://www.facebook.com/AZAdventurers>)

O Reuniones con el Personal # _____ % asistencia _____

O Reuniones de Red Familiar _____

Galardones Completados _____

Mes: _____

Año: _____

Nombre de Club:

Director: _____

Información de contacto preferido

Numero de reuniones de club
calendarizadas, con/sin uniforme:
Promedio de asistencia _____%

Dirección: _____

normalmente nos reunimos (día)

_____ - _____ () a.m. () p.m.

Membresía:

Familias: __ ASD __ Non ASD

__ Pajaritos __ Cachorros Curiosos

__ Ovejitas __ Castores

__ Abejitas __ Rayitos de Sol

__ Constructor __ Mano Ayudadora

Noticias Mensuales

Club de Aventureros de Arizona

O Noticias del Club: Díganos lo que han hecho este mes.

O Anuncios del Club: Díganos acerca de sus próximas actividades o información que gustaría compartir con otros. (i.e., eventos especiales, recaudación de fondos, información de contacto para paseos, etc.)

O Petición de Oración: Cualquier cosa por la que quisiera que la Familia de Aventureros orara.

Mes: _____

Año: _____

Reporte de Alcance a la Comunidad

Club de Aventureros de Arizona

Nombre de club: _____

Director: _____

Nombre de actividad: _____

Explicación de actividad _____

Reporte:

Donde ocurrió la actividad: _____

Numero de familia alcanzadas: _____ ASD _____ Non ASD _____

Literatura Distribuida: Si _____ No _____ Nombre de Literatura _____

Contribución Monetaria: Si _____ No _____ Contribución de ropa: Si _____ No _____

Otra Contribución: Si _____ No _____ Tiempo invertido en proyecto/actividad: _____

¿Cómo ha impactado este proyecto a sus aventureros?

Mes: _____

Año: _____

Reporte: Reunión de Red Familiar Club de Aventureros de Arizona

Nombre de Club: _____

Director: _____

Fecha de la actividad: (Por favor marque el mes correspondiente y escribe la fecha de la actividad en la línea en la cual realizo la actividad.)

Octubre _____ Diciembre _____ Febrero _____ Abril _____
 Otra _____

Nombre de Actividad _____

Explicación de Actividad _____

Donde ocurrió la actividad: _____

Número de Familias Alcanzadas: _____ ASD _____ No ASD _____

Asistencia: Familias del club _____ % Familias no miembros del club _____ %

¿Esta actividad la realizo usted o fue en conjunto con alguna organización y/o ministerio de la iglesia?

No Si; cual? _____

¿Como impacto esta reunión s sus familias? _____

Mes: _____

Año: _____

Coordinator Visitation Request 2018-2019

Club Name _____

Director _____

Phone _____

We are requesting a Club Visitation from our Adventurer Coordinator because we are working toward the "Club of the Year" requirements. Our Visitation will occur during a scheduled club meeting.

Time and Day of Meeting _____

Meeting Location _____

Date Preferences:

1. _____

2. _____

3. _____

Director

Date of request

Investiture Request Form 2018-2019

Club Name _____

Director _____

Phone _____

We are requesting an Investiture Date.

Time and Day of Investiture _____

Meeting Location _____

Date Preferences:

1. _____

2. _____

3. _____

Director

Date of Request

Please submit your order by April 15th

Adventurer Final Report 2018-2019

Club Name _____

Director _____

Club Members to be invested:

Little Lambs _____

Eager Beaver _____

Busy Bee _____

Sunbeam _____

Builder _____

Helping Hand _____

Adv. Helping Hand _____

Adults _____

Stars:

Total for the Year _____

Chips:

Total for the Year _____

Awards:

Total for the Year _____

ADVENTURER REGISTRATION FORM

I would like to join the _____ Adventurer Club. I will attend club meetings, hikes, camping and field trips, missionary adventures and other club activities. I agree to be guided by the rules of the club and the Adventurer Pledge and Law.

Name _____ Date _____

Address _____

City _____ State _____ Zip _____ Grade _____ Age _____

Home Phone _____ Emergency number _____

Date of birth _____ School _____ Church _____

Check classes in which you have been invested:

Busy Bee

Sunbeam

Builder

Helping Hand

PLEDGE:

Because Jesus loves me,
I can always do my best

LAW:

- Be obedient
- Be attentive
- Be pure
- Be helpful
- Be true
- Be cheerful
- Be kind
- Be thoughtful
- Be respectful
- Be reverent



I, _____, want to join the _____
(name of applicant) (club name)

I will attend meetings, activities, field trips and other club activities. I will proudly wear my Adventurer uniform and obey club guidelines. I will be cheerful, helpful, honest, kind and courteous.

(signature of Adventurer)

APPROVAL/CONSENT OF PARENT/GUARDIAN

As parent/guardian, I understand that the Adventurer program is an active one which includes many opportunities for service, adventure, fun, and learning. I will support the program by:

1. Encouraging my Adventurer to take an active part in all club meetings and functions
2. Attending events to which parents are invited in support of my Adventurer
3. Assisting club leaders by serving as a helper when needed
4. Not holding any individual staff member liable in the event of an accidental injury
5. Giving my permission for the above-named Adventurer to attend Adventurer activities

(Signature of parent/guardian)

(Parent's address)

(Primary phone)