

2021-2022 Adventurer Secretary Packet



www.azsdayouth.com

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Important information to remember:

1. Submit Certification Application forms no later than **October 1, 2021**
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** to complete. **Make sure they give you the GUIDELINES**, and keep them with you for your records. They need to complete the volunteer verification by **October 15, 2021.**

2021-2022 AdventSource Code: **ArizonaClubs#2022**

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

Or by email to: az_adventurers@yahoo.com

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

2021-2022

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*

Or by email to: az_adventurers@yahoo.com

Arizona Conference Youth Ministries

Club Charter Application: Part 2

Director's Name _____

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. 117
Email: az_adventurers@yahoo.com

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

Arizona Conference Youth Ministries



2021-2022 Part 3: Staff Registration Form

This page must be submitted, with complete **Charter Application**, to the Arizona Youth 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 2020-2021.

Esta parte debe presentarse con la **Aplicación del club** y con toda la información de los voluntarios, para poder recibir su certificación. Las siguientes personas están trabajando actualmente como oficiales y personal de nuestro club y desean inscribirse en la Conferencia de Arizona para el año 2020-2021 de los Aventureros.

- Important rule:** Do not recruit a volunteer who has been a church member for less than six months.
- Regla muy importante:** No incluya voluntario en el club si no han sido miembros de la iglesia por al menos 6 meses

Club Name: _____

Church: _____ Director's Name _____

Title/Título: Director, Deputy Director, Secretary, Teacher, etc / Director, Director Asociado, Secretaria, Maestro, etc.

* If any of your club volunteers have not completed the "Adventist Screening Verification" in or after 2020, please ask them to complete the following form training: <https://www.ncsrisk.org/adventist/> we will also send them an email with this information to the email you will provide in this form.

*Si alguno de los voluntarios de su club no ha completado "La verificación de antecedentes Adventista Sterling" en o después del 2020, favor de pedirles que completen su entrenamiento en el siguiente enlace: <https://www.ncsrisk.org/adventist/> Nosotros también enviaremos esta información al correo electrónico del voluntario que usted incluirá en esta forma.

1. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? ____ Yes(Si) ____ No

2. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? ____ Yes(Si) ____ No

3. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? ____ Yes(Si) ____ No

Title: Director, Deputy Director, Secretary, etc

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

4. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

5. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

6. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

7. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

8. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

9. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

10. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

11. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

Title: Director, Deputy Director, Secretary, etc

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

12. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

13. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

14. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

15. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

16. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

17. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

18. Staff Name/Nombre: _____ Title/Título: _____

Email: _____ DOB/ Fecha de nacimiento _____

Telephone/Télefono: _____ Has this volunteer completed the "Adventist Screening Verification" in or after 2020?

Este voluntario ha completado los requisitos de la Verificación Sterling en o después del 2020? Yes(Si) No

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 2021-2022.

Club Name: _____

Church: _____ Director's Name _____

Adventurer	Birthdate	Current Class
1		
2		
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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** "Adventist Screening Verification" online at <https://www.ncsrisk.org/adventist/> 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 and keep on file for your records

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 "Adventist Screening Verification" en línea en <https://www.ncsrisk.org/adventist/> 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 guardéla en su archivo para sus records

Monthly Reports

2021-2022

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 CUATRO 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

FAX: 480-991-4833

Or Email: az_adventurers@yahoo.com

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 O No
- 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 O Yes O No
- O Arizona Conference Adventurers Facebook contribution (<https://www.facebook.com/AZAdventurers>)

- O Adv. Staff Meetings # _____ % attendance _____
- O Family Network Meeting _____

Awards Completed

Month: _____

Year: _____

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

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: _____

Adventurer Final Report 2021-2022

Deadline date: April 14, 2022

Club Name _____

Director _____

Club Members to be invested:

Baby Birds _____

Curious Cubs _____

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 Club Membership Application



Child's name _____ Birth date _____ Pre-k K 1 2 3 4
Circle one

Parent/guardian name(s) _____

Address _____
Street City State/Prov. Zip/PC

Home phone _____ Cell phone _____

Parent/guardian email _____

Church _____ School _____

Check level(s) the child has completed: Little Lamb Eager Beaver Busy Bee
 Baby birds Sunbeam Builder Helping Hand
 Curious Cubs

Pledge

Because Jesus loves me, I will always do my best.

Law

Jesus can help me to: Be obedient, Be pure, Be true, Be kind, Be respectful, Be attentive, Be helpful, Be cheerful, Be thoughtful, Be reverent.

Applicant Commitment

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

Parent/Guardian Commitment

As parent/guardian, I understand that the Adventurer Club is active and 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 in support of my Adventurer.
3. Assisting club leaders by serving as a helper when needed.
4. Not holding any individual club 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