

SECC ADVENTURER

Registration/Insurance Form

This application is for: **Leader** (18+) circle one: *director asst. director secretary instructor Master Guide other*
 Member

Applicant's Information

Church _____ Date _____

Name _____ Phone _____

Address _____ City _____ Zip Code _____

Email _____

Age _____ Birth Date _____ Grade in School _____

School you attend _____

Church you attend _____ Are you baptized? _____

Applicant's Agreement

I, _____, want to join the _____. I will attend all "Share Your
(applicant's name) (Adventurer Club)
Faith" activities, outings, and other club activities, unless I am ill. I will proudly wear my Adventurer uniform. I will obey club rules and understand that they have been made for my safety and that of my peers. I will be cheerful, helpful, honest, kind and courteous.

(applicant's signature)

Approval/Consent of Parent/Guardian

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

1. Encouraging my Adventurer to take an active part in all club meetings and functions
2. Attending all 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 club staff member liable in the event of injury
5. Giving my permission for the above named Adventurer to attend all Adventurer activities
6. Paying Southeastern CA Conference registration/insurance fees in the amount of \$10.00
7. Paying local club fees in the amount of \$ _____

(parent/guardian's signature)