



Adventurer Club Membership Application

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

Circle one

Parent/guardian name(s) _____

Address _____

Number / Street / City / Province / Postal Code

Home phone _____ Cell phone _____

Parent/guardian email _____

Church _____ School _____

Check level(s) the child has completed: Little Lamb Eager Beaver Busy Bee Sunbeam

Builder Helping Hand

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

Little Arrows Adventurer Club Registration Fees

Registration fees cover the 10 month Adventurer Club year. This includes club registration with the Ontario Conference of the Seventh-day Adventist Church, club insurance, uniform insignias, class workbooks and supplies, club pins, investiture awards/patches, type-B uniform, scarf, and slide.

Uniform Rental: If your child does not already own a Type A uniform or if (s)he has outgrown their Type A uniform, a uniform will be provided for the year. The uniform must be returned after Investiture. If it is not returned, you will incur an additional fee of \$25 for uniform replacement. The uniform needs to be returned in similar condition to when you received it. It is recommended to only allow your child to wear this uniform during the required ceremonies and to change immediately after. If the uniform is returned with rips or unreasonable wear, you will incur an additional fee of \$25 for uniform replacement.

Please fill in your child's name and the total in the appropriate column.

1 st Child _____	Returning Member	New Member
Registration	\$50	\$60
Uniform Rental (Type A)	\$10	\$10
Total		

3 rd Child _____	Returning Member	New Member
Registration	\$30	\$40
Uniform Rental (Type A)	\$10	\$10
Total		

2 nd Child _____	Returning Member	New Member
Registration	\$40	\$50
Uniform Rental (Type A)	\$10	\$10
Total		

4 th Child _____	Returning Member	New Member
Registration	\$30	\$40
Uniform Rental (Type A)	\$10	\$10
Total		

TEXT

Registration and Uniform Total: \$ _____



ADVENTURER MEDICAL INFORMATION AND LIABILITY RELEASE RECORD

Parent/Guardian and Emergency Contact Information:

In the following section, please list the parent's/legal guardian's name and contact information as well as an additional emergency contact person. The additional person will be notified if the parent(s)/guardian(s) cannot be reached.

Adventurer's Name: _____ Date of Birth ____/____/____ (dd/mm/yy)

Parent(s)/Legal Guardian(s) _____

Address: _____ Home Phone # (____) _____

City: _____ Province: _____ PC: _____ Daytime/Cell Phone:(____) _____

Secondary Contact Person _____ Relationship to Adventurer _____

Home Phone # (____) _____ Daytime/Cell Phone # (____) _____

Adventurer's Health Record and Medical Information:

The Ontario Conference of Seventh-day Adventists is required by law to obtain the following health information before accepting an Adventurer participant. **Please include a copy of immunization record with registration form.**

Adventurer's Physician _____ Office Phone # (____) _____

Health Card # _____

History:

- Sore Throats Sleepwalking
- Sinusitis Heart trouble
- Bronchitis Diabetes
- Fainting Asthma
- Stomach upset Bed-wetting
- Kidney trouble
- Special dietary
- Convulsions
- Other

Allergies:

- Drugs Plants Animals
- Foods Bee/Insect Stings

Antidote:

- Benadryl Anakit
- Epikit Other
- Nurse administered
- Self care
- Other:

Medications:

Is the child currently taking medication?

No Yes

Drug Name _____

Dosage _____

Time _____

Permission to administer:

Tylenol Plain Yes No

Aspirin Yes No

Medical and Liability Release:

I am/We are in favour of the aforementioned child attending Adventurer events (i.e., fun days, fairs, rallies, field trips, club meetings, camporee, etc.) and participating in all activities unless otherwise specified. As parent(s)/legal guardian(s), I/We accept the conditions stated, including the release of the Ontario Conference of Seventh-day Adventists from liability in case of accident or illness. I/We support, and the applicant agrees to abide by all event rules and Adventurer regulations and policies. In case of emergency, I/we give permission to the nurse/adult leader selected by the Adventurer Council/Club to hospitalize, secure proper treatment for, and to order injections, anaesthesia, or surgery for my/our child. If the child's medical information changes after initial submission, please notify the Ontario Conference Adventurer Department and your child's Adventurer Club in writing.

Parent(s) / Guardian _____

Print Name

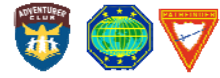
Print Name

Parent(s) / Guardian _____

Signature

Signature

Date: _____



PARENTAL CONSENT FORM

This form MUST be signed by a parent or legal guardian of any young person (under age 18) participating in organized activities sponsored by the Adventurer, Masterguide, & Pathfinder (AMP) Ministries of the Ontario Conference of the Seventh-day Adventist Church. Please submit this completed and signed form to your club director and/or event organizer.

Full name of child if under 18 years old: _____

I understand that the Ontario Conference and its representatives will take all reasonable steps to provide individual care and safety for each child, but I am aware that the Ontario Conference, its officers, employees, agents and volunteers cannot assume responsibility for any injury, loss, damage or harm to any child or to his/her property during the course of any activity which is part of the above ministry event, including traveling to and from the event.

I understand and acknowledge that certain risks of injury, loss, damage or harm are inherent to participation in any ministry or activity and I agree to indemnify and save harmless the Ontario Conference of the Seventh-day Adventist Church, its officers, employees, agents and volunteers from and against any injury, loss, damage or harm that may befall my child as a result of his/her participation in this ministry UNLESS such injury, loss, damage or harm is caused by the SOLE NEGLIGENCE of the Ontario Conference or its representatives while acting within the scope of their duties.

Event/ Activity: _____

Date: _____ Location: _____

I hereby grant permission for my child, whose full name appears above, to fully participate in the abovementioned event/activity. I declare having read and understood the above and hereby consent to my child participating on the basis described. The Ontario Conference of the Seventh-day Adventist Church is solely responsible for the use and protection of any and all personal information collected from registrants.

In addition, permission is hereby given for any photos, videos or other media format of my child to appear in any advertising or reporting material produced by the Ontario Conference or its parent organizations. Yes No

(Printed name of parent or legal guardian) (Signature) (Date Signed)

(Printed name of parent or legal guardian) (Signature) (Date Signed)

Emergency Contact Information:

Name _____ Phone number: _____

E-mail: _____ Relationship to child: _____



Videography/Photography Release Form

This letter confirms the agreement between you and the Adventurer Ministry of the Ontario Conference of the Seventh-day Adventist Church regarding your participation in this activity to be photographed and/or videotaped (the Property) from time to time.

For valuable consideration received, you hereby irrevocably grant to the Adventurer Ministry, perpetually, exclusively, and for all media throughout the world (including print, non-theatrical, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footages taken of you as a result of your participation in approved activities of the Adventurer Ministry.

You hereby agree that you will not bring or consent to others bringing claim or action against the Adventurer Ministry of the Ontario Conference of the Seventh-day Adventist Church on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publicity.

You hereby release the Adventurer Ministry, its directors, officers, successors and assigns from and against any and all claims, demands, actions, causes of action, suits, costs, expenses, liabilities and damages whatsoever that you may hereafter have against the Adventurer Ministry in connection with the Property.

This agreement shall not obligate the Adventurer Ministry Program to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. The Adventurer Ministry shall have the right to assign its rights hereunder, without your consent, in whole or in part, to any person, firm or corporation.

AGREED TO AND ACCEPTED THIS _____ day of _____, 20_____

Adventurer's Signature

Witness

Signature of Parent or Guardian

Witness

Print Name of Adventurer: _____