

Name		Bir	thdate	(mm/dd/yyyy)			
Addres	SS_						
City	State	Zip Code	Email_				
Home Phone		Business Phone					
Church	1	Church Phone					
Church Address				Outpost #			
Activit	ies in church other than Roy	al Rangers					
		Present Royal Range	ers Position				
	Group Leader Asst. Outpost Coordinator Adventure Ranger	☐ Asst. Group Leader☐ Outpost Committee☐ Expedition Ranger		☐ Outpost Coordinator ☐ Outpost Chaplain ☐ Pastor			
		Membership Requ	irements				
Boys C	<u>Only</u>						
• •	Are you an active member Choose one: O DR Gold Eagle Provide a copy of you	e? Y N Date of your of your local chartered outpos Award Adventure Bronze or certificate for verification with	t? Y N	R E1 Award			
Leuuer							
•	 Complete the Ready and Safety Levels of the OLAL- Provide a copy of your Ready and Safety certificates wit this application. Are you an active member of your local Chartered Outpost? Y N 						
•	Are you presently a member in good standing in your church? Y N						
Boys a	nd Leaders						
٠	Complete a Frontier Adver- Upon receipt of this applie of the next Frontier Adver-	cation and fee, your chapter sci	ribe will contact	you concerning the date and location			

8.2 Membership Application

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Revision Date: March 2017

PASTOR'S ENDORSEMENT/COMMENTS Does the candidate live his life in a Christ-like manner? Please explain:						
Pastor's	Signature	Date:				
Phone: _	Emai	il:				
OUTPOS	ST COORDINATOR'S ENDORSI	EMENT/COMMENTS				
Outpost	Coordinator's Signature		Date:			
	Emai					
Sponsor	's Signature		Date:			
Phone: _	Emai	1:				
Christ-lil	ke men and life long servant and agreeing to live by the	leaders, and that the Frontiers	selize, equip, and empower the next generation of smen Camping Fellowship upholds this area in its requirement, I hereby submit my application for			
Applicant's Signature:Date:						
Application Fees: (determined by chapter) \$40 for boys / \$50 for leaders/adults - Payable to Potomac Royal Rangers						
Mail app	olication and fee to: Mark Bra	annon 2815 Angus Chase	Lane Huntingtown, MD 20639			
Chapter Use Only						
	Date received:	Amount paid:	Date information letter mailed:			

