

# Royal Rangers Alumni

## District Membership Application *(Print all information)*

Leader's First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Spouse First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ Evening Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Leader's Birthday \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Spouse's Birthday \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Wedding Anniversary \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Month Day Month Day Year

Church You Attend \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church Phone \_\_\_\_\_ Pastor's Name (Print) \_\_\_\_\_

Region: Northeast District: Potomac Section: \_\_\_\_\_

Current Royal Ranger Position: \_\_\_\_\_ OP# \_\_\_\_\_

Retired: Yes No (Circle One) Position Held at Retirement: \_\_\_\_\_

Membership Fee: Lifetime \$100 \*Make checks payable to Potomac District Royal Rangers

Skills that you would be willing to share with RRA projects. Color all circles that apply:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Carpentry         | <input type="checkbox"/> Electrical         | <input type="checkbox"/> Painting             |
| <input type="checkbox"/> Plumbing          | <input type="checkbox"/> Mechanical         | <input type="checkbox"/> HVAC                 |
| <input type="checkbox"/> Masonry           | <input type="checkbox"/> Electronics        | <input type="checkbox"/> Equipment Operator   |
| <input type="checkbox"/> District Camps    | <input type="checkbox"/> National Camporama | <input type="checkbox"/> Concession Stand     |
| <input type="checkbox"/> Cooking           | <input type="checkbox"/> Administration     | <input type="checkbox"/> GMA Review Board     |
| <input type="checkbox"/> Communications    | <input type="checkbox"/> Computers          | <input type="checkbox"/> Sound System         |
| <input type="checkbox"/> Video/Photography | <input type="checkbox"/> General Assistance | <input type="checkbox"/> Emergency Assistance |

Please list any additional interests, skills or hobbies on the back of this form.

|                     |
|---------------------|
| <b>Attach Photo</b> |
|                     |

Member's Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Pastor's Approval Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

District RRA Commander \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

**Send application with a \$100 check payable to Potomac District Royal Rangers to:**  
Royal Rangers Alumni  
2326 Liberty Road  
Eldersburg, MD 21784

Any Questions? Please call (410) 781-0236