

Important Instructions

* 3 Meals on Saturday, T-shirts and patches are included in the \$65.00 scholarship price if preregistration deadline of August 1 is met.

** 3 Meals on Saturday, T-shirts and patches are included. Sorry but \$20 Scholarships are no longer available after the postmarked date of August 1st. Registration will stay open. Beginning August 2 through August 15 the cost will Be \$85 each person. To ensure T-shirt orders paper forms must be mailed and postmarked by US Postal service by August 10. Registration will be closed on August 16. Walk – ins only available after August 16, \$100 per person per ticket for walk-ins

*** FOR ALL CAMPERS (OUTPOST) THIS IS A MUST – Upon arrival outpost (attendees) MUST check in at Registration before entering the camp, to confirm your numbers and receive your campsite location and receive your T-shirts for register attendees only. To expedite your entry, have all forms together in a folder or large envelope. Remember this is a MUST – Bring all additional forms. We (camp officials) will need a copy to keep for the safety and security of all. We suggest you keep a copy for yourself (outpost). Currently Commanders – WE ARE OPEN FOR SUGGESTED REFORMS, please.

If you need financial assistance, please contact the District Director Ryan West at 818-454-4825.

Insurance Information

applicant for participation. Lung problem yes no Hearing difficulty yes no Hearing difficulty Records for minors (under Heart trouble yes no Bad eyesight yes no Any disorder preventing age 18) must include a parent High blood yes no Wear contact lenses yes no Any disorder preventing or guardian's signature. Royal Allergy-Asthma yes no Any medical care in the Taking prescription Rangers office reserves the Fainting or dizzy yes no Any surgery within past yes no May reaction to drugs or medicine person based upon his medical Appendix yes no yes?? yes no or any type? yes yes			Applican	t's Full Name			Hea	ulth Insura	nce Compa	any's Name
Baytime Contact Phone Number Evening Contact Phone Number Effective date of coverage Health Insurance Company's Phone Number Ceneral Imformation Health History to be completed by the explicant (faver 18) or by a parent/guardian if the explicant is a minor (under age 18), ites the applicant experienced the following? Check 'Yes' or 'No.' Porseal Medical Record must be completed by acet to guardiant is a minor (under age 18), ites the applicant experienced the following? Check 'Yes' or 'No.' Important is a minor (under age 18), ites the applicant experienced the following? Check 'Yes' or 'No.' Porseal Medical Record must be completed by each to guardiant signation to be and yes and the participation. Important is a minor (under age 18), ites the applicant experienced the following? Check 'Yes' or 'No.' Porseal for participation. Important is a minor (under age 18), ites the applicant experiments of the applicant is a minor (under age 18), ites the applicant experiments of the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is a minor (under age 18), ites the applicant is applicant is a minor (under age 18), ites the applicant is applicant is a minor (under age 18), ites the applicant is applicant is a minor (under age 18), ites the applicant is applicant is a minor (under age 18), ites the applicant is applicant is a minor (under age 18), ites the applicant is appr			y please not		·		Poli	icy Numbe	er	
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Applicant	Signature



Swim Permission Form

Cumberland River, Williamsburg, KY

_____ DATE: _____

I give permission for my child to swim at the following location listed above.

I DO NOT grant permission for my child to swim at the following location listed above.

Please provide your Child with appropriate swimsuits for the event.

For the purpose of:

Swimming - recreational at Cumberland River, Williamsburg KY at Patrick's Point

There will be a Red Cross certified lifeguard and Commanders always present.

Please give us information on regarding your child's water skills:



No experience with water



- Has been in water with no formal instructions.

Has taken the following classes:

Does your child usually wear flotation devices while in water?	Yes	No	
(This would include water wings)			

Any other information y ou would like to provide:

Parent or Guardian Signature



BAPTISM NOTIFICATION FORM

Your child will be invited to be baptized at Pow Wow. We are excited about your child's desire to be baptized; However, it is our desire to be sensitive to you, the parent. Therefore, we are asking for your preferences as it relates to the baptism.

The Kentucky District Royal Rangers exercises believer's baptism. Believer's baptism is full submersion under water, which serves as a symbolic expression of one's faith in Christ. Believer's baptism is only done to those who have already prayed to surrender to Christ as their personal Lord and Savior.

Child's Full Legal Name		<u> </u>
Child's Address	· · · · · · · · · · · · · · · · · · ·	
City	_State	Zip
Child's Date of Birth	Child's Age	e

- Please baptize my child and I would like to attend (Sunday @ 9am)
- Please baptize my child and I will not attend.
- Please do not baptize my child. We would prefer to do this at home/church.

Signature of Parent/Legal Guardian:

Phone:

Date:



Campsite Inspection Form

Outpost #	-					
Church Name						
Campsite: Entry Way			Pres	ent	1	0
Cleanliness of Camp	5	4	3	2	1	0
Layout of Campsite	5	4	З	2	1	0
Proper placement of tents, fire pit, kitchen, cutting area, etc.						
Tent/Shelter Appearance, inside Uniforms neat & clean, etc.	5	4	3	2	1	0
Camp craft lashing Items (up to 5) 1 pt. each, 2 if properly lashed. Items to make camp enjoyable and comfortable	10	8	6	4	2	0
Duty Roster & Schedule	5	4	З	2	1	0
Sanitation: Proper Storage of Food	5	4	3	2	1	0
Garbage/Trash Disposal	5	4	3	2	1	0
Health & Safety:						
Proper Fire Area Setup Including fire control	5	4	3	2	1	0
Tool Rack & Cutting Area Properly identified, located, tool edges covered, etc.	5	4	3	2	1	0
First Aid Kit Readily available, identified,	5	4	3	2	1	0
stocked, etc						
Personal Hygiene Provisions	5	4	3	2	1	0
Pre-registration Points:					10	0
Comments:						

Total.



Entry Way Judging Form

Outpost #	on Entry Way	Pres	ent =			5			
		Not I	Presen	t =		0			
Theme Related:		Yes =	Much what		3 2 1 0				
Quality of Workmanship: Evident skill, sturdiness, etc.		5 V, variet	4 y of ma	3 aterials,	2 Col	1 orful, attra	0 active -	eye appe	al,
Theme Related: "MODERN DAY KNIGHTS thought out theme relati			4 and ma	3 akes up	2 o er	1 ntire cons	0 struction	n, clearly	
Originality & Difficulty of Fresh new ideas not reu some ingenuity and effo	used entry way, cle					1 or someth	0 hing rea	quiring	

Total Points

Note!!! The Entry Way may be built at the outpost and assembled at Pow-Wow. It is to be planned and built by the boys and leaders of the outpost. Commanders will assist in design and some construction. However, allow your boys to build much of this!!! Their own work is what we are looking for and is what they will be judged on and most proud of. Let them make memories, don't make them for them.

It is an extremely difficult judgment call to say the Entry Way is totally adult built and therefore you're on your honor. Men, we are relying upon your integrity to verify that your boys helped designed and built this Entry Way. Therefore, I am asking you to sign the following statement and then post this Judging form on your Entry Way prior to the inspection on Saturday. Thank you for your cooperation in this matter.

By signing my name to this form, I testify to the fact that the boys of my outpost did most of the work and design to bring this Entry Way into existence.

Signature of Senior Commander at POW-WOW



OUTPOST SKIT APPROVAL FORM

Participation earns outpost five points:

Outpost #	Number	of	Boys	Participating	in	Skit:
Briefly describe the skit you	wish to p	rese	ent:			

Alternate skit you wish to present:

Approval of POW-WOW Coordinator			
	mpleted by Program Coo	ordinator	
Skit Evaluation & Approval: To be cc Is skit theme related?	Yes		No
Is skit fresh, new, innovative?	L Yes		No
Is skit exciting, fast paced? Is skit under 5 minutes in	L Yes		No
length?	∐ ☐ Yes		No
Do majority of boys participate?	Yes		No
Skit is?	Approved		Disapproved
POW-WOW Coordinator' Signature			

This form must be completed and brought with you to POW-WOW and Present this completed form to POW-WOW Coordinator at registration. He will review and approve or disapprove your skit. Grand POW-WOW points are awarded five additional points for participation. FIRST, SECOND AND THIRD PLACE TROPHYS AWARDED TO OUTPOST



OUTPOST & PERSONAL EQUIPMENT

Registration & Permission Forms Medical release forms Patrol Flags First Aid Kit Pastors Men from the church

The following are suggested lists of equipment you may want to bring to POW-WOW. You may add to or subtract from these lists.

Outpost Camping Gear:

Tents Dining flies Lanterns with extra mantles Coleman fuel with funnel Matches Water containers, drinking & fire Rope Tables Chairs Hand ax

Personal Gear: Toilet Kit Uniform Flashlight Bible Sleeping bag Pillow Bug repellent Sun screen Canteens

Camping stool

Spending money

Hand washing pan/soap Shovel Bow saw Hammer Bulletin board Coolers, Ice Campsite Entry Way Trash bags Displays Paper Towels

Towels Poncho Spending money Extra clothing Blanket Sleeping pad Extra Blanket Shower shoes Camera Personal Tent Extra money