



# Chapel West Eternal Flame Pathfinder Club

## New Member Enrollment Form



I would like to join the Eternal Flame Pathfinder Club. I will attend club meetings, hikes, camping and field trips, missionary activities and other club activities. By signing I agree to be guided by the rules of the club and the Pathfinder Law and Pledge.

Pathfinder Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Pathfinder Pledge**

By the grace of God,  
I will be pure, kind, and true  
I will keep the Pathfinder Law  
I will be a servant of God  
And a friend to man.

**Pathfinder Law**

1. Keep the morning watch
2. Do my honest part
3. Care for my body
4. Keep a level eye
5. Be courteous and obedient
6. Walk softly in the sanctuary
7. Keep a song in my heart
8. Go on God's errands

**Club Fees**

Registration Fee: \$5.00  
Club Dues: \$20.00 (per quarter)  
Insurance: \$4.00

**Pathfinder Information**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Church: \_\_\_\_\_

I have been a Pathfinder  Yes  No Where: \_\_\_\_\_

Pathfinder Email: \_\_\_\_\_ Parent Email: \_\_\_\_\_

**Approval by Parents or Guardians**

The applicant must be in the 5<sup>th</sup> grade to join the club.

We have read the Pathfinder Pledge and Law and are willing and desirous that the applicant become a Pathfinder. We will assist the applicant in observing the rules of the Pathfinder organization. In consideration of the benefits derived from membership, we hereby voluntarily waive any claim against the club or the Indiana Conference of Seventh-day Adventist for any accidents which may arise in connection with the activities of the Pathfinder Club. As parents, we understand that the Pathfinder Club program is an active one for the applicant. It includes many opportunities for service, adventure, and fun. We will cooperate by:

1. Learning how we can assist the applicant and their leaders
2. Encouraging the applicant to take an active part in all activities
3. Attending events to which parents are invited
4. Assisting club leaders and by serving as leaders if called upon
5. Purchasing Pathfinder insurance through the club treasurer
6. Supplying needed information on the Membership Application and Health Record

We hereby certify that \_\_\_\_\_ was born on \_\_\_\_\_  
(applicant's name) (month/day/year)

\_\_\_\_\_  
Signature of father or guardian

\_\_\_\_\_  
Father or guardian's occupation

\_\_\_\_\_  
Signature of mother or guardian

\_\_\_\_\_  
Mother or guardian's occupation

Date of application \_\_\_\_\_  
Amount Paid \_\_\_\_\_

Secretary's Signature \_\_\_\_\_  
Treasurer Signature \_\_\_\_\_



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**Permission Slip for Off-Premises Activities**

Pathfinder Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby give permission for my child to participate in any off-premise activity that the club elects to do that is within the general area of the club. These activities include but are not limited to: nature walks, outreach in the neighborhoods around the church, etc. These activities will be within walking distance of the church and walking will be the method of transportation. Any major off-site activity (such as those that require transportation by vehicle, or are possibly overnight activities) will have a separate permission slip issued giving exact details of the activity. During any club sponsored activity, all Pathfinders will be under the supervision of an adult.

I DO grant permission for my child to participate in off-site activities.

I DO NOT grant permission for my child to participate in off-site activities.

I wish to be notified when an off-site activity has occurred.

I have special wishes that must be followed in order for my child to participate in off-site activities, listed below:

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



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**Parent/Guardian Contract**

Pathfinder Name: \_\_\_\_\_ Parent Name(s): \_\_\_\_\_  
\_\_\_\_\_

As the parent(s) of the child listed above, I (we) understand that we will have the following responsibilities:

- Bringing my child and picking up my child on time for every meeting and event (properly prepared with correct uniform, supplies, etc.)
- If I am not able to bring my child, I will arrange for alternate transportation
- I understand that meetings and events are important and that they should not be missed except for emergencies (i.e. child is sick, death in the family, etc.)
- I understand that if my child accumulates 2 or more unexcused absences, that they may be placed on probationary status, or asked to leave.
- I understand that the work in the club is important and will help make sure that my child is completing their work assigned by the club (readings, assignments, etc.)
- I will pay the club dues on time (unless other arrangements have been made)
- I will keep the club updated in any changes that may affect my child (change of address, medical conditions, etc)

By signing this contract, you accept these responsibilities and agree to follow them so that your child will have a fun and nurturing time in the club

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Staff Use Only**

**Forms:**

- Information Page \_\_\_\_
- Permission Slip \_\_\_\_
- Health Record \_\_\_\_
- Parent Contract \_\_\_\_

**Dues**

- Registration: \$5 \_\_\_\_
- Insurance: \$4 \_\_\_\_
- Club Dues \$60 \_\_\_\_
  - 1<sup>st</sup> \$20 \_\_\_\_
  - 2<sup>nd</sup> \$20 \_\_\_\_
  - 3<sup>rd</sup> \$20 \_\_\_\_

**Class:**

- Class Assigned: \_\_\_\_\_
- Classbook Assigned: \_\_\_\_

Registration Certified: \_\_\_\_  
Staff Initial: \_\_\_\_