Pathfinder Club Membership Application

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

Pathfinder Signature:

# Pathfinder Pledge

By the grace of God,

I will be pure, kind and true I willkeep the Pathfinder Law I will be a servant of God and a friend to man.

Registration Fee $ Club Dues $ Insurance $

# 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

Name Phone AY Class Address City State Zip School Grade Church ..

|  |  |  |
| --- | --- | --- |
| I have been a Pathfinder: | O Yes O No | Where?  |
| My dad is a Master Guide: | O Yes O No | My dad has been a Pathfinder: O Yes O No |
| My mother is a Master Guide: | O Yes O No | My mother has been a Pathfinder: O Yes O No |

Approval by Parents or Guardians

The applicant must be in at least the 5th grade as a Junior Pathfinder or age 13 as a Teen Pathfinder.

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 South Atlantic Conference of Seventh-day Adventists 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:

* 1. By learning how we can assist the applicant and his leaders.
	2. By encouraging the applicant to take an active part in all activities.
	3. By attending events to which parents are invited.
	4. By assisting club leaders and serve as leaders if called upon.
	5. By purchasing Pathfinder insurance through the club treasurer.
	6. By supplying needed information on the Membership Application and Health Record.

We hereby certify that was born on

*applicant’s name*

Signature of father or guardian Signature of mother or guardian

Date of application

 *month/day/year*

Father’s or guardian’s occupation Mother’s or guardian’s occupation