



RANGER KIDS TRAINING CONFERENCE REGISTRATION INFORMATION

To insure successful registration for this training event, please keep the following items in mind:

- All information requested on the application, such as your contact information and complete date of birth, must be provided.
- The completed health history must be sent with your application.
- All information requested on the health history, including insurance information, must be completed and the form must be signed and dated by the applicant. Incomplete forms will delay registration.
- The fees quoted on the application are **per person** fees.
- Payment in full or the \$50.00 pre-registration fee **must be received** with the application to secure your place at the event. Checks or money orders should be made out to **ROYAL RANGERS**. Please do not send cash.
- We accept Visa, MasterCard, American Express or Discover credit/debit cards. If using this method of payment, the cardholder's name as it appears on the card, signature, and billing address/phone number must be provided in the space along with the card number, expiration date and the amount to be charged.
- Applications may be mailed or faxed to the Royal Rangers training office. **We NEVER recommend emailing credit card information!**
- Applications received without payment may not confirm registration unless approved by the national Royal Rangers office. Contact the training office for details.
- Any balance due will be collected onsite at the event registration.
- Registration questions can be directed to the training department. Our contact information is listed below.
- All sessions must be attended in order to receive credit for this training. Those arriving after the conference begins or leaving before the conference ends may not receive credit for the event.
- Payment confirmation and additional event information will be sent by either email or post when the application is processed.
- Late applicants – those wanting to register within seven days of the start date of an event – should contact the training office prior to sending in their application of instructions.

Royal Rangers, 1445 N. Boonville Ave. Springfield, MO 65802-1894
Training office phone: 417.862.2781 x4179 Email: rangers@ag.org

Revised 10/20/11

**HEALTH HISTORY FORM
NATIONAL ROYAL RANGER TRAINING EVENTS**

THIS ENTIRE FORM MUST BE COMPLETED AND SENT IN WITH THE APPLICATION. THE NATIONAL ROYAL RANGERS MINISTRIES OFFICE HAS THE PREROGATIVE TO DENY APPLICANTS BASED UPON THE INFORMATION PROVIDED.

Applicant's Name: (Please Print.)		Birth Date: (mm/dd/yyyy)			
Height:		Weight:		Occupation:	
HEALTH HISTORY					
Please check YES or NO to the following and briefly explain any YES answers in the space provided below. Use the back of this form, if necessary.					
QUESTION/CONDITION	YES	NO	QUESTION/CONDITION	YES	NO
Hearing Difficulties?			Have you had medical treatment in the last 12 months?		
Lung Condition?			Have you had surgery in the last 12 months?		
High Blood Pressure?			Have you been exposed to infectious diseases in the last 3 weeks?		
Heart Problems?			Have you been exposed to Hepatitis in the last 6 months?		
Asthma/Allergies?			Do you have any disorders that would prevent strenuous activity?		
Fainting/Dizziness?			Are you taking any prescription medications?		
Shortness of Breath?			Have you had any allergic reactions to any types of drugs or medications?		
Vision Problems?			Sinus Condition?		
Contact Lens Wearer?			Food Allergy?		
Skin Infections or Problems?					

PLEASE USE THE SPACE BELOW TO EXPLAIN ANY "YES" ANSWERS:

If you are currently taking medication, please complete the section below.

MEDICATION	DOSAGE	FREQUENCY

GIVE THE LATEST DATE OF INOCULATION OR VACCINATION AGAINST THE FOLLOWING:		INSURANCE INFORMATION
DISEASE	Inoculation Date (month/year) if known	Please provide the following information regarding your health insurance coverage. If NONE, please indicate that.
TETANUS	/	INSURANCE COMPANY'S NAME:
MEASLES	/	INSURANCE COMPANY'S PHONE NUMBER: ()
DIPHTHERIA	/	POLICY NUMBER:
SMALL POX	/	CERTIFICATE/GROUP NUMBER:
POLIO	/	EFFECTIVE DATE OF COVERAGE:
TYPHOID	/	POLICY HOLDER'S NAME:

****EMERGENCY CONTACT**** (PLEASE DO NOT LIST PERSONS ATTENDING EVENT WITH YOU.)

NAME _____ RELATIONSHIP _____

DAYTIME PHONE (____) _____ EVENING PHONE (____) _____

I, the undersigned, hereby acknowledge that to the best of my knowledge, I qualify for participation in this event and do hereby agree to abide by the rules and standards established for this event by its appointed leadership. I acknowledge that the information provided on my Health History is true and correct and I consent to the administration of emergency medical treatment at the discretion of the event leadership. I further acknowledge my understanding that media footage, including audio, video, and photographs may be recorded at this event for future promotional use and hereby consent to the use of such items containing images of me in any form and relinquish all rights of ownership or compensation.

Applicant's Signature _____ Date _____

RKTC Schedule

(One-Weekend Option)

ALL SESSIONS MUST BE COMPLETED IN ORDER TO RECEIVE CREDIT FOR THIS TRAINING.

Friday

- 9:00 Registration begins
- 11:00 Lunch
- 11:30 Orientation/Instruction on formations
- 1:00 Rotating Classes – 30 min. (+5 for rotation)
- Visual Aids
 - Outdoor Safety
 - Games
- 2:45 15 Minute Break
- 3:00 Instructional Classes – 30 min (+5 for rotation)
- Music
 - Nature Crafts
 - Soul Winning
- 4:45 Class Session: Puppet Making
- 5:30 Patrol Work
- 6:00 Dinner
- 7:00 Model Outpost Meeting
- 8:30 Class Session: Council Fires – 30 Minutes
- 9:15 Old West Council Fire

Saturday

- 7:00 Breakfast
- 8:00 Patrol Work
- 8:30 Presentations/Formations
- 9:00 Rotating Classes – 30 min. (+5 for rotation)
- Bible Stories/Storytelling
 - Trip Planning
 - Counseling Boys
 - Classroom Management

Saturday, continued

- 10:05 20 Minute Break
- 11:30 Lunch – 50 Minutes
- 12:20 Puppet Shows
- 1:20 Class Session: Day Camping – 40 minutes
- 2:00 20 Minute Break
- 2:20 Model Day Camp
- 3:30 Instructional Classes – 30 min. (+5 for rotation)
- Advancements
 - Council of Achievement
- 4:40 Patrol Work
- 6:00 Dinner
- 7:00 Evening Assembly/Patrol Time
- 8:30 Council Fire

Sunday

- 7:00 Breakfast
- 7:45 Council of Achievement (Formations)

RANGER KIDS TRAINING CONFERENCE PERSONAL EQUIPMENT CHECKLIST (One-Weekend Option)

UNIFORMS

- Complete **Royal Rangers** uniform from the options below or **Girls' Ministries** uniform
Minimum of ONE of the following uniform options:
UTILITY (RR utility shirt and blue jeans with brown or black belt or tact pants with black belt)
SPECIAL (RR t-shirt or RR sports jersey/polo with blue jeans and brown or black belt or tact pants with black belt)
DRESS (Khaki shirt and pants, tan webbed belt, appropriate footwear)

For more information on uniform options, go to: <http://royalrangers.com/programs/uniforms/>

CLOTHING

- Windbreaker-style Jacket
- Royal Rangers sweatshirt (for colder areas only)
- Pair of jeans, or other work-type pants for casual wear
- Royal Rangers T-shirts (May substitute Ranger Kids or Girls Ministries t-shirts)
- Extra uniforms or clothing for fresh change
- Pair of shoes or boots for outdoor activities
- Socks
- Poncho or raincoat
- Underclothing and handkerchiefs
- Pajamas
- Please note: No cap or hat is needed. A special ball cap will be issued.

PERSONAL ITEMS

Sleeping Bag/ Twin-size Bedding
Bible
Flashlight (Extra Batteries)
Pen/Pencil
Personal First Aid Kit
Personal Hygiene Items
Towels/Washcloths
Water Bottle

OPTIONAL ITEMS

Ranger Kids Handbook
Umbrella
Sewing Kit
Insect Repellent
Camera
Aspirin/Other Medications Needed
Facial Tissues
Sunscreen/Sunblock
Sunglasses
Pillow
Extra Craft Materials (Refer to Trainee Booklet)

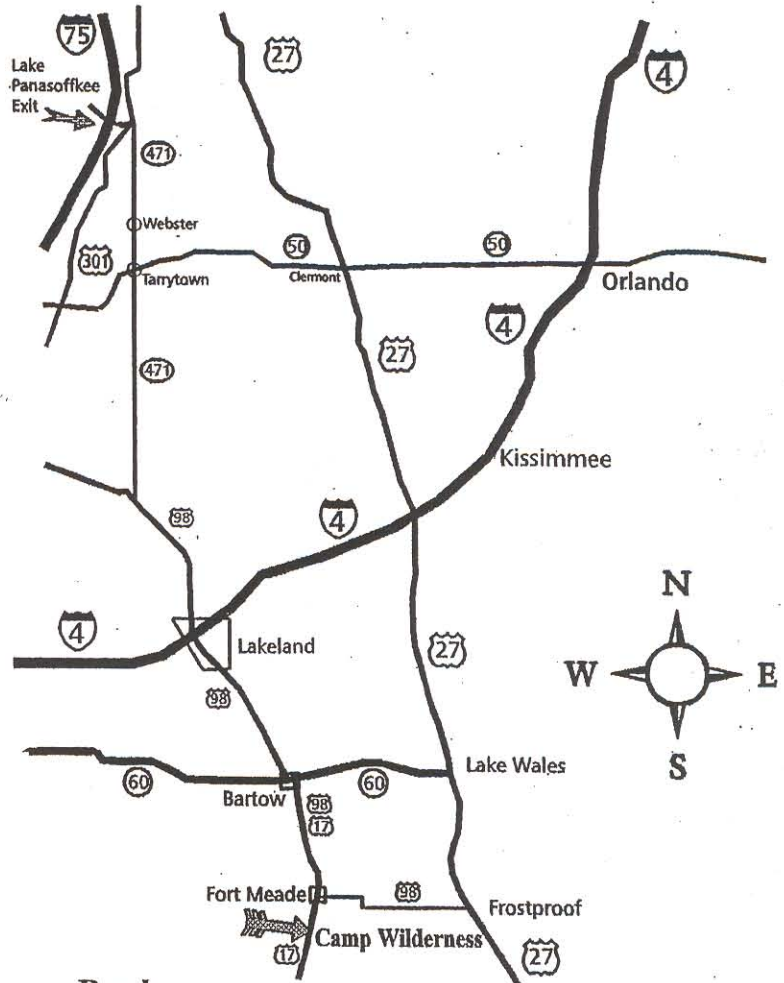
From I75

Instruction
 I75 to Lake Panasoffkee Exit East
 Stay on south S471
 Pass through Webster (FL)
 Take the
 At Lakeland (FL) remain on
 To Bartow (FL)
 At Bartow stay on the
 Go 12 miles South to (Fort Meade)
 ARRIVE Fort Meade (FL) At only working traffic light remain on US17 south for three miles Camp
 Wilderness on the left.

Road
 S470 to U301 to S471
 U92 / U98 East toward Lakeland
 U92 / U98
 U98 / US17 south



CAMP WILDERNESS
 3065 HWY 17 SOUTH
 FT MEADE FL 33841
 863.285.8067



From I95

Instruction
 Pass by Haines City (FL)
 Arrive at Lake Wales
 (Bartow)
 At Bartow go to
 (Fort Meade)
 ARRIVE Fort Meade (FL) At only working traffic light remain on US17 south for three miles Camp
 Wilderness on the left.

Road
 I95 to I4
 I4 to U27
 U27
 (FL) S60 16 miles West to
 U98 / U17 12 miles South to