



OUTPOST LEADER ADVANCEMENT APPLICATION

FOR OFFICE USE
AMOUNT PAID: _____
FOP: _____

Application Date: _____

First Name:	MI:	Last Name:
Home Address:		
City:	State:	Zip Code:
Preferred Phone Number:	Alternate Phone Number:	
Email Address:		
District:	Royal Ranger Leadership Position:	
Church:	Outpost #:	Currently Chartered? Yes <input type="checkbox"/> No <input type="checkbox"/>

SAFETY LEADER CHECKLIST

REQUIRED TRAINING ELEMENTS (Verification by district required)	DATE COMPLETED
First Aid/CPR Course (from a nationally recognized provider) Organization Name: _____	
Ranger Safety online or classroom course (Circle one) Location of classroom course: _____	

REQUIRED PRACTICAL APPLICATIONS (Honor system-not verified by district)	DATE COMPLETED
Planned and conducted an outpost activity focused on applicable safety measures with the help of the junior leaders	
Read <i>Preventing Child and Substance Abuse</i> and reviewed the discussion questions included with a group of boys and/or parents	

(PLEASE NOTE: This application MUST be signed by the District Director OR the District Training Coordinator. Any items left blank will result in a delay in processing.)


By signing, I confirm that the applicant has completed the required training elements and noted the dates, locations, and sources of completed training in the fields above.		
_____	_____	_____
Signature	Title (DD or DTC)	Date

Processing fee: (Includes 2 Patches, Certificate, & Shipping/Handling)	\$10.00 (non-chartered price) \$8.50 (chartered price)	Additional Patches: (Per Patch; includes Shipping/Handling)	\$3.75 (non-chartered price) \$3.00 (chartered price)
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Please allow 3 to 4 weeks for processing.

(FOR CREDIT/DEBIT CARD PAYMENT ONLY)	
CARD NUMBER: [][][][] [][][][] [][][][] [][][][]	EXP. DATE: [][]/[][]
NAME OF CARDHOLDER AS IT APPEARS ON CARD (PLEASE PRINT)	
SIGNATURE OF CARDHOLDER	
BILLING ADDRESS (IF DIFFERENT THAN ABOVE)	
BILLING TELEPHONE NUMBER	

\$
AMOUNT



Mail form to: Royal Rangers, 1445 N. Boonville Ave, Springfield, MO 65802-1894
Fax form to: 417.831.8230.
Please make checks payable to ROYAL RANGERS.