Calgary Central Crusaders Pathfinder Club



1920 - 13th Avenue N.W. Calgary, Alberta T2N 1L3 centralcrusaders@gmail.com

PATHFINDER INFORMATION (To be filled out by the Pathfinder)		
Name: Birthday:		
Email Address: Phone Number:		
Grade: School:		
Baptized member of the SDA Church: Yes No		
If No, are you interested in Baptismal Classes?		
Previously a member at another Pathfinder Club: If Yes, Where: Yes No		
Circle the classes you've completed and are invested in:		
Friend Companion Explorer Ranger Voyager Guide		
Master Guide		
I,, want to join the Crusaders Pathfinder Club. I will attend meetings, activities, field trips and other club activities. I will proudly wear my Pathfinder Uniform and agree to be guided by the rules of the club and the Pathfinder Pledge and Law.		
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.		
Law : The Pathfinder Law is for me to: Keep the morning watch. Do my honest part. Care for my body. Keep a level eye. Be courteous and obedient. Walk softly in the sanctuary. Keep a song in my heart. Go on God's errands.		
Pathfinder Signature Date		

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REGISTRATION INFORMATION	_
Pathfinder's Full Legal Name:	
Primary Parent's Name: Secondary Parent's Name:	
Primary Email: Secondary Email:	
Address:	
Primary Phone Numbers Home: Cell:	
Secondary Cell:	
EMERGENCY CONTACT INFORMATION (someone to contact if we cannot contact you, the parent)	
Name: Relationship:	
Address:	
Phone Numbers Home: Work: Cell:	
HEALTH INFORMATION	
Pathfinder's Alberta Health Care Number:	
Medical Issues/Diagnosis (i.e. Asthma, Heart Problems):	
Medications taken regularly (Name, dosage and frequency):	
Allergies: (Medication Allergies)(Other Allergies)	
Are your child's vaccines up to date (Circle one): Yes No	

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APPROVAL/CONSENT OF PARENT/GUARDIAN (Please initial each section you are agreeing to) _____ I have read the Pathfinder Pledge and Law and am willing and desirous that my child become a Pathfinder. I will assist my child in observing the rules of the Pathfinder Club Organization. As a parent/guardian, I understand that the Pathfinder program is an active one which includes many opportunities for service, adventure, fun and learning. I will support the Pathfinder program by: 1. Encouraging my child to take an active part in all club meetings and functions. 2. Attending events to which parent are invited in support of my child. 3. Assisting club leaders by serving as a helper when needed. 4. Not holding any individual club staff member liable in the event of accidental injury. 5. Giving permission for the above named Pathfinder to attend club activities. _____ In case of emergency, and I the parent/guardian am unable to be contacted for whatever reason, I hereby give permission to the physician selected by the club staff, to hospitalize/secure proper treatment for, and to order injection/anesthesia or surgery for my child if deemed necessary by the attending physician. ____ I hereby give permission for my child to have their picture/s taken at/during functions/events pertaining to any of the clubs involved within the Crusaders Club of the Calgary Central SDA Church. I understand that a picture/s and/or written name of my child may be used by the local or conference clubs and other events. This may take the form of a poster/power point presentation/album/newspaper/SDA publication etc. _____ I, the undersigned, declare that all information on this form is correct. I consent to have my contact information show through What's App and email but only with current members of the Crusader Club families. Parent/Guardian Signature ______ Date _____ ANY INFORMATION THAT MAY BE HELPFUL TO PATHFINDER STAFF: