



**Arizona District Royal Rangers
Junior Leadership Training Academy
Camp Registration Form
July 24-27, 2013
Cedar Creek A/G Church**

OFFICE USE ONLY
Rec'd _____
Paid _____
Owe _____

Deposit & completed application form must be postmarked by **June 28, 2013** to receive discount.
You will be notified of acceptance along with Camp directions, list of supplies, and any other instructions prior to the camp.
Balance is due first day of camp.

NO APPLICATIONS ACCEPTED AFTER JULY 17TH!

Camp	Deposit with Registration Form must be postmarked by June 28 th		Total Camp cost (remaining amount due at arrival)			
			Total cost of camp by June 28 th		Total cost of camp after June 28 th deadline.	
	Chartered Outpost	Non-Chartered Outpost	Chartered Outpost	Non-Chartered Outpost	Chartered Outpost	Non-Chartered Outpost
J T C/AJTC	\$80	\$95	\$150	\$175	\$165	\$190
J-Elite			\$65	\$85	\$85	\$105

Please Check the Camps that you have previously completed:

DTC
 ATC
 JTC
 AJTC
 JTT
 JSC
 JMC
 JCE
 JWC
 J-Elite

Please check shirt size (for camp T-shirt):

Youth sizes: Small
 Medium
 Large
 X-Large
 Adult sizes: Small
 Medium
 Large
 X-Large

PLEASE PRINT NEATLY AND COMPLETE THE FOLLOWING INFORMATION:

Name _____			Date of Birth ____/____/____		
(Last)	(Middle)	(First)			
Address _____					
City _____		State _____	Zip _____		
Phone () _____			E-mail _____		
Church _____			Pastor _____		
Section _____		Chartered Outpost # _____		Grade Entering this Fall _____	

YOUR SENIOR COMMANDER MUST COMPLETE AND SIGN THE FOLLOWING

The above listed applicant meets **all** of the requirements necessary to attend the above registered camp. The applicant is in good standing in our Church and Outpost displaying potential for leadership. Since these requirements are necessary to ensure the most effective training experience, failure to meet these requirements will result in dismissal from the camp.

Sr. Commander (Printed) _____ (Signature) _____

Phone # () _____ Chartered Outpost# _____ Date _____

The applicant to the best of my knowledge is in good standing in our Church and Outpost and displays the potential for leadership.

Pastor (Printed) _____ (Signature) _____ Date _____

Mail completed forms with a check made out to "Arizona District Royal Rangers" to:

**Infusion Community Church
Attention: Lawrence Hernandez
P.O. Box 334
Queen Creek, Az 85142**

Any questions?
Call JLTA Coordinator: Brent Weston
 602-828-2927 (cell)
 email: brent.weston88@yahoo.com



Arizona District Royal Rangers JLTA HEALTH HISTORY/CAMP PERMISSION FORM

The following information is necessary and must be completed in order for your son to attend the Junior Leadership Training Academy. Print neatly and check each blank line to ensure it is completed with proper information.

NOTE: The Arizona District has the prerogative to accept or reject applicants based upon their medical health.

Applicant's Name: (Please Print.)		Birth Date: (mm/dd/yyyy)		Height:	Weight:		
HEALTH HISTORY		Answer YES or NO to the following & briefly explain all YES answers under REMARKS.					
Sinus Condition?		Food Allergies?					
Lung Problems?		Do you wear contacts?					
High Blood Pressure?		Medical Care within the past year?					
Allergies/Asthma?		Surgery within the past year?					
Fainting/Dizziness?		Taking prescription medication?					
Shortness of Breath?		Any reaction to drugs or medication of any type?					
Skin Infections?		Exposure to infectious disease within the past 3 weeks?					
Hearing Difficulties?		Exposure to Hepatitis within the past 6 months?					
Vision Problems?							
Give latest date of inoculation or vaccination against the following:		Tetanus	Small Pox	Measles	Typhoid	Diphtheria	Polio

REMARKS AND MEDICAL FACTS WE SHOULD KNOW IN CASE OF EMERGENCY:

In Case of Emergency Please Notify:					
NAME		RELATIONSHIP		2ND EMERGENCY CONTACT	
ADDRESS		CITY	STATE	(____) _____ PHONE NUMBER	
(____) _____ DAY PHONE		EXT. _____		(____) _____ EVENING PHONE	

Parent/Legal Guardian Consent: I hereby authorize _____ to attend the Junior Leadership Training Academy July 24-27, 2013 and permission to administer medical attention to the applicant in the event of a medical emergency.

Signature _____ **Date** _____