



Singapore Royal Rangers

Advanced Trail Camp

20 - 23 March 2019

“Making Right Decisions”

The Trail Camp is a physically tough camp. It is purposefully designed with the intent of placing a youth in a trail environment over the course of 3 days where trainees are tasked to navigate in the outdoors and learn about spiritual truth of making right decisions.

GOALS & PURPOSE

The goal of the trail camp is not to simply teach backpacking skills, but to help each youth grow in their relationship with Christ. This is accomplished through outdoor trail activity under the supervision and help of matured and experienced Royal Ranger Leaders.

The nature of this camp pulls youth out of their comfortable environment and into a physical one where they will operate with their patrols, navigate, look for checkpoints, and spend nights without the comfort of the youth's proper living. The camp curriculum and practicum creates opportunities to teach life lessons as well as impart key spiritual truths about God and be ministered by God in the outdoor night services.

SPIRITUAL DEVELOPMENT

The Trail Camp is purposefully designed with the intent of creating an environment where a Ranger can discover not only more about themselves personally through the patrol hike, but see how every decision they make has a resulting consequence.

The trail camp will have a central spiritual theme of 'Making Right Choices' that will be developed through a variety of resulting means.

WHO CAN ATTEND (prerequisites)

For Expedition Ranger who:

1. has completed Advanced Expedition Camp (AEC); and
2. is between 16 to 18 years old.

FOR OFFICE USE

Singapore Royal Rangers
ADVANCED TRAIL CAMP
APPLICATION



REC:
DUE:

Date: 20 – 23 March 2019

REGISTRATION DETAILS

- Early bird camp fee - **\$150** (Registration before and on **13 January 2019**)
- Regular Camp fee - **\$180** (Registration received from **14 January 2019** onwards)
- For any camp cancellation due to unforeseen circumstances, a \$20 fee will be charged and remainder of fee refunded.
- Please print & submit this application, together with full fees, to your Outpost Senior Commander.

APPLICANT'S DETAIL (all fields must be fill out)

Name: _____ Gender: _____
 Birth certificate or NRIC #: _____ Date of birth: _____ Age: _____
 Address: _____
 Telephone: ^(hp) _____ ^(home phone) _____
 Commander's name: _____ Outpost #: _____
 Name of siblings in camp: _____

PARENTAL OR GUARDIAN CONSENT (all fields must be fill out)

I, ^(Parent's/ Guardian's name) _____, ^(Parent's/ Guardian's NRIC#) _____,
 hereby authorize the above applicant to attend the Royal Rangers Youth Leadership Academy. I understand that adequate precautions for the safety of my child/ward will be taken. I will not hold the local church or its leaders, or Assemblies of God Singapore General Council responsible for any accidents, mishap or death that may occur during the above camp. I also consent to the collection, usage and processing of personal information including photographs, video/film recording, sound recording and other contact information relating to my child/ ward for the use of record, promotional and publicity activities (in print & social media sites).

Address: _____ Relationship to child /ward: _____
 Parent/ Guardian Contact: ^(hp) _____ ^(home) _____
Parent's/ Guardian's Signature: _____ **Date:** _____

IN CASE OF EMERGENCY, PLEASE CONTACT: (all fields must be fill out)

Contact Name: _____ Relationship to child/ ward: _____
 Contact Telephone: ^(hp) _____ ^(home) _____

SENIOR COMMANDER'S RECOMMENDATION (all fields must be fill out)

The above applicant has fulfilled the stated prerequisites. I recommend him/her for the camp.

S.C. Signature: _____ **S.C. Name:** _____



EMERGENCY MEDICAL INFORMATION AND AUTHORIZATION

*This form must be signed by parent or guardian, and must accompany your child/ward to the Camp. The purpose of this form is to make it possible for camp leaders or first-aiders to authorize emergency treatment for **minor** Royal Rangers who may become ill or injured. You can authorize such treatment for your child/ward, by completing this form:*

I, (Parent's/ Guardian's name) _____, the parent / guardian (Please delete accordingly) of
(Applicant's name) _____, a minor, who is attending a Royal Ranger event,
do hereby give my consent, in the event the administration of any treatment is deemed necessary by
licensed physicians, dentists or emergency personnel.

Signature: _____

Date Signed: _____

Contact number: _____

YOUR CHILD'S/ WARD'S MEDICAL HISTORY:

Food Allergies

Medical Allergies

Medically Diagnosed Special Behavioural Needs:

Dyslexia / Anger Management / Aspergers / Epilepsy / Inattentive ADHD / Hyperactive ADHD /

Others : _____

Any Other Instructions
