## 2022-2023 Jupiter Gems Adventurer Club

**Additional Member Information**

Adventurer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to join the Jupiter Gems Adventurer Club. I will attend meetings, activities, field trips, and other club activities. I will proudly wear my Adventurer uniform and obey club guidelines. I will be cheerful, helpful, honest, kind, and courteous.

Adventurer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**Emergency contact information** (other than parents)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Approval by Parents or Guardians**

As parent/guardian, I understand that the Adventurer Club is active and includes many opportunities for service, adventure, fun, and learning. I will support the program by:

1. Encouraging my Adventurer to take an active part in all club meetings and functions.
2. Attending events in support of my Adventurer.
3. Assisting club leaders by serving as a helper when needed.
4. Not holding any individual club staff member, the Jupiter Gems Adventurer Club, or the Florida Conference of SDA liable in the event of an accidental injury.
5. Giving my permission for the above-named Adventurer to attend Adventurer activities.
6. Our club occasionally uses photos/video of events for promotional and historical use. By participating in Jupiter Gems Adventurer Club activities, you are granting permission for your photo and your child’s photo/video to be used.

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Signature of mother, father, or guardian Date of application