



Welcome to Ranger Kids Fest

Saturday , Sept 17,2022 9am-3pm

**Bethany A/G
580 Main Street
Agawam, MA**



Psalm 94:16-17 NIV

**Who will rise up for me against the wicked?
Who will take a stand for me against
evildoers?**



- **RK Fest:** We'll have a bunch of fun events for the boys to win awards and much more for RANGER KIDS. We will also have a variety of fun activities!
- **First 65 Ranger kids/Leaders** to register will receive Special Edition Patch.
- Ranger kids Fest Registration Fee..... **\$20.00 per person/ Lunch included in price.**



Please take a few minutes to review this entire booklet.

ARRIVAL AT RANGER KIDS FEST

Registration Opens:

- Saturday, Sept. 17. at 9 AM

Registering: -> Show up at the Registration booth with:

1. **Activity Supervisory Certification Forms**, completed and signed by your Pastor,
 - i. ALL Adults (Staff, FCF, Cooks, Visitors ,EVERYONE) must be listed on the ASCF!
2. Two (2) copies of the **Medical form** for every person attending RANGER KIDS FEST.
 - a. One copy is turned in. One copy stays at the outpost site.
 - b. Forms printed from Navigator will be accepted **if** the Subscriber's date of birth is on the form.
3. **Consent forms** - we must have **one for each boy** signed by his parent or guardian.

What to bring? Bring everything you think you or boys may need for day camp, such as change of clothes in case of emergency, any special food, allergy or asthma medications needed. **Please bring a tarp for your outpost to sit on and a canopy for shade.** Money to purchase tickets in order to purchase goodies and snacks at StarkTowers Missions Booth.



RULES OF THE ROAD –

Every leader should read and be aware.



- We practice Two-Deep Leadership. A minimum of 2 Pastor Certified Leaders must attend Ranger Kids Fest with each group.
- Drinks will be available for \$1.00 /each.
- Please dispose of garbage in trash receptacles. Rangers Leave it better than how they found it.
- Please respect marked areas. Caution tape marks areas off limits.
- Everyone is required to attend the General Assemblies.
- Dress boys appropriate for weather. Keep outside temperatures in mind when suggesting what to wear.
- Please refer all health emergencies to the **HEALTH & SAFETY TEAM.**

THANK YOU FOR MAKING OUR EVENT SAFE AND FUN FOR EVERYONE!

RANGER KIDS FEST ACTIVITIES

1. The Purpose of the activities is to allow flexibility for the boys to participate at their level of choosing. The boys are encouraged to watch or jump in and participate. Leaders should feel free to watch, give tips, instruction, or play along in a manner that allows for maximum fun for the boys.
2. A lite lunch will be served. Any additional food can be purchased at the **STARK MISSION STATION.**

FUN EVENTS / Free time Include: See the map for locations

Spider-man Soccer Pit

Transformers Face Painting

Captain America Arts/Crafts

Superhero Basketball

Superhero Birdy Tennis



Rock the Planet

Hawkeye Archery

Cyclops Shooting



Stark Towers Missions Booth Drinks and Snacks to purchase..(\$1-\$2)(by tickets only)

COMPETITION EVENTS: See the map for locations/Follow the Signs

**SUPERMAN VS.IRONMAN JUMP-
(LONGEST JUMP)**

SAVE THE PLANET-(2MAN TEAM TIMED)

CATCH THE VILLIAN OBSTACLE (TIMED)

HULK SMASH RUN (TIMED)

Leaders must fill out Event time sheets prior to going over to the competition event. One form for EACH event is required .) There are 5 Events.

Make as many copies of each Event time sheets as needed for your outpost.

**Write your boy's names and bib number on each event sheet.
(Bib numbers will be given at registration upon arrival.**

THOR THROW (FARTHEST THROW)

Outpost with Most Ranger Kids receives our 1st Most Super Ranger kids Hero Trophy

When you get to that competition event give the Commander/ Leader incharge of the competition your event time sheet for that event.

The Event commander than will turn in the Event time sheets to Staff for scoring and tallying.



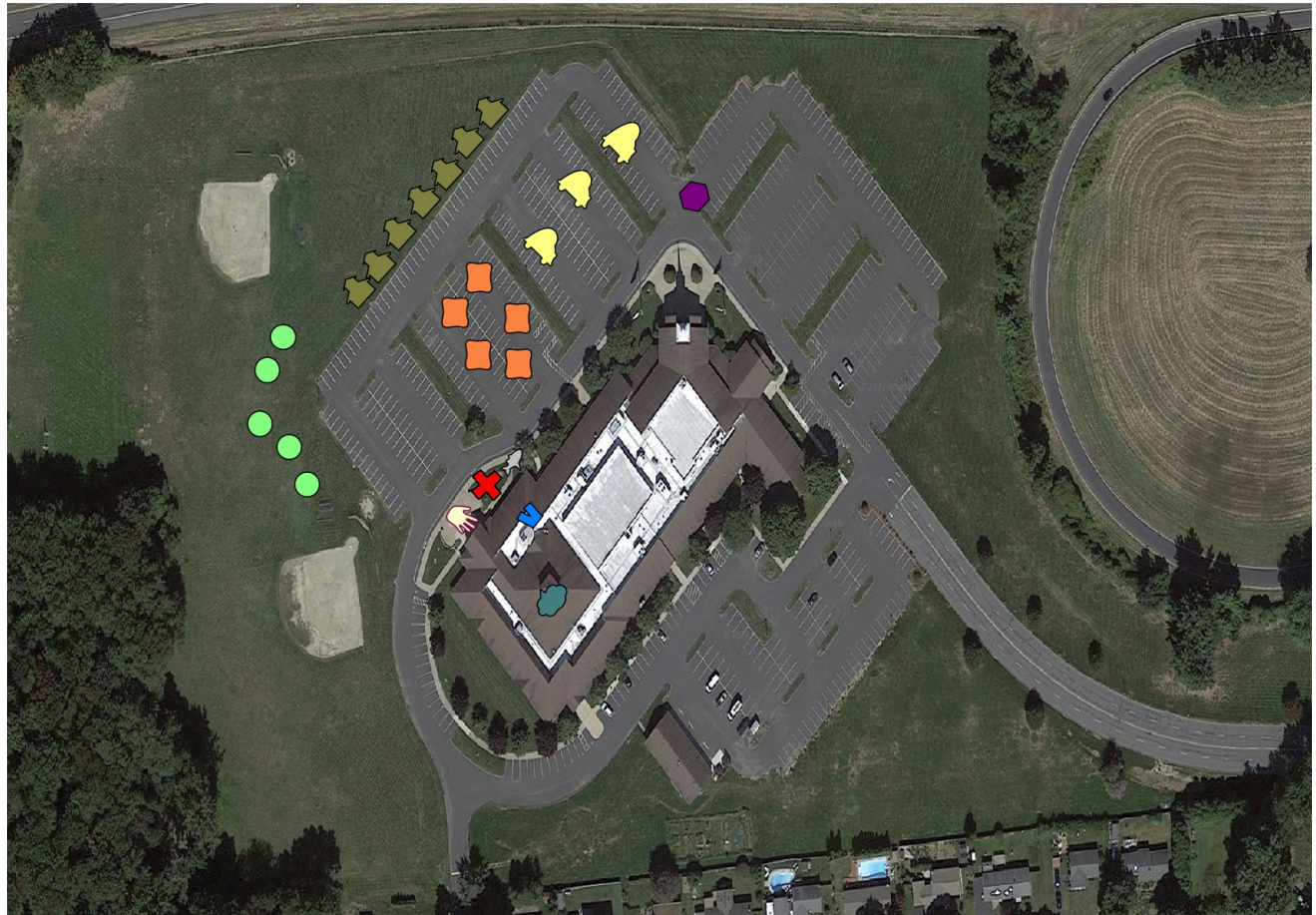
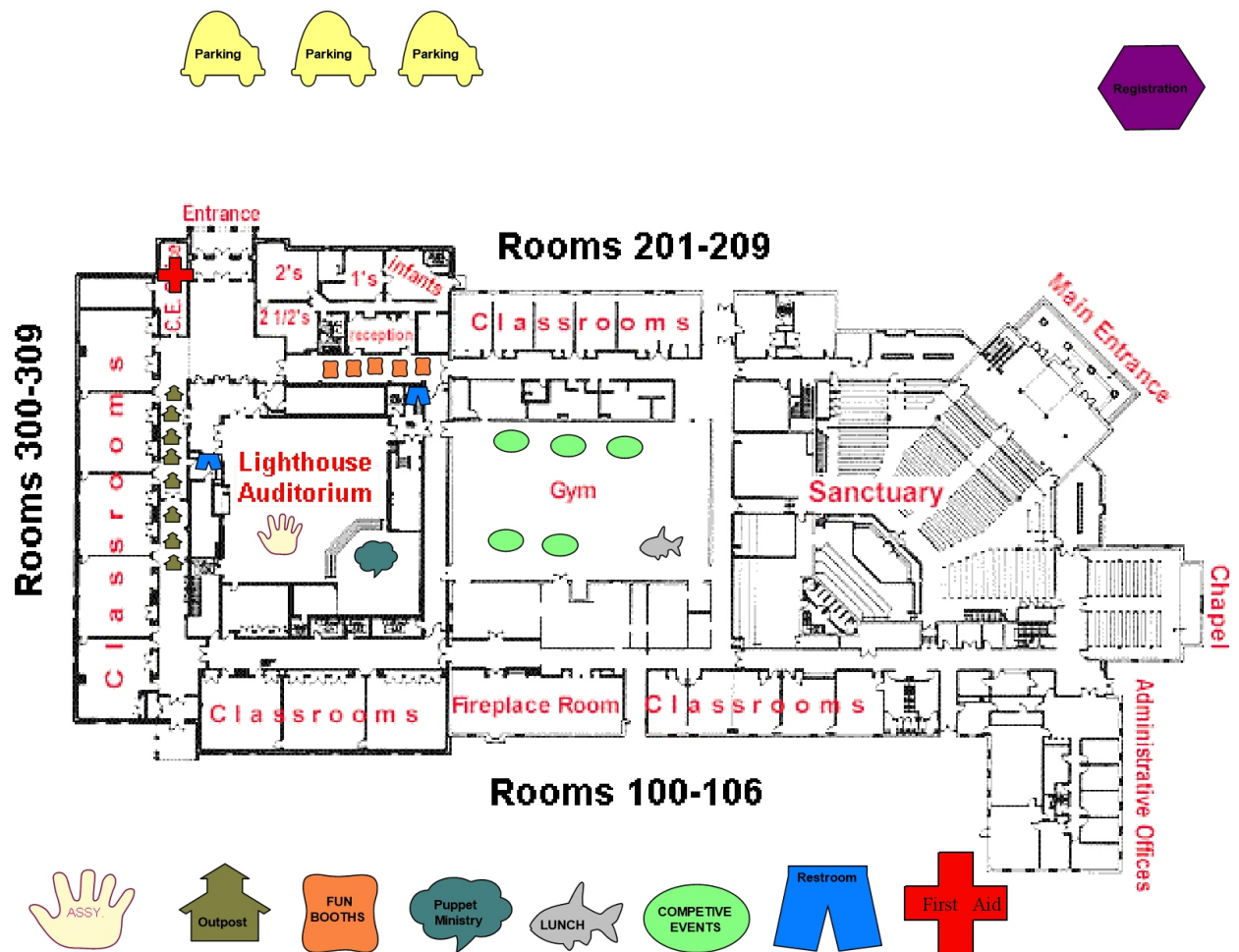
RANGER KIDS FEST SCHEDULE

Saturday

9:00 AM	Registration Opens
9:30-10:00 AM	Opening Ceremony
10:00AM-12PM	Events/ Free time
12PM-1PM	LUNCH
1PM-2PM	Continue Events/ Fun time / 2pm Events Close
2:05PM-2:30PM	Special Guest- Bethany A/G Puppet Ministries (Devotional)
2:30PM-3PM	Announcements/Awards/ Special Recognition /Closing



*Leaders; please watch your boys and sit with your boys as close to the front as possible during assembly. Please help keep order and keep campground clean. Please be prepared to be ministered to and to minister to your boys at the service.
Thank you!





ACTIVITY SUPERVISORY CERTIFICATION FORM

This form is to be completed for **all** persons involved in the supervision or custody of minors while attending any Network activity involving children and youth. It is being used to help the Network provide a safe and secure environment for those children and youth who participate in our District sponsored program.

It is mandatory that any adult attending the event listed below have a background check by the church listed below. The church listed below will be the responsible party to ensure that each individual listed below has had a background check within the last 12 months of this event.

PLEASE PRINT CLEARLY:

Name of Event: _____ Date: _____

Church Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

➤ Person in charge of group at this event: _____

List full name of all persons who will be attending this event in a supervisory or custodial capacity:
(The pastor's initials must on each line just after the listed name.)

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Does your church have a written child abuse policy on file? ____ YES ____ NO

➤ **PASTOR'S CERTIFICATION OF CHURCH WORKER(S):**

I am personally acquainted with the above named person(s), and in my opinion is/are competent and qualified for work with minors. I know of no facts or allegations that raise any question concerning suitability for working with minors in the above stated District activity. Those named above have had a background check within the last 12 months and is on file with this church.

Pastor's Signature of Affirmation* _____

***Participation in this district event will be denied for those acting in a supervisory/custodial capacity if not signed by the Pastor.**

Individual Medical Form

Health History and Medical Permission Form

One form per person (Must have a copy of this for every boy and man when you register at event/camp.)

Please print

NOTIFY IN AN EMERGENCY:

Today's Date _____

Name _____

Name _____

Address _____

Address _____

City _____

City _____

State _____ Zip _____

State _____ Zip _____

Phone () _____

Emergency Phone () _____

Date of Birth _____

Relationship _____

Grade _____ Parent Email Address _____

Ranger Outpost # _____ Church Name _____ City _____ State _____

Have you ever been treated for any of the following? If yes, check the box.

- ☐ Heart disease
- ☐ Seizures
- ☐ High blood pressure
- ☐ Asthma
- ☐ Bronchitis
- ☐ Diabetes

Please provide additional information about any items (checked Yes) to left.

Date of last Tetanus booster _____
(month and year)

Please identify any allergies, physical impairments or limitations: _____

Please list any medications being taken: _____

Do you wear: (If yes, check the box.)

- ☐ Contacts
- ☐ Glasses
- ☐ Dental appliance

IN THE EVENT HOSPITALIZATION IS NEEDED, PLEASE FILL IN BELOW

Name of Insured: _____
(POLICY HOLDER)

MEDICAL / HOSPITAL INSURANCE COMPANY: _____

POLICY OR CERTIFICATE NUMBER: _____

EMPLOYER: _____ EMPLOYER'S GROUP: _____

NUMBER: _____ SUBSCRIBER'S DATE OF BIRTH: _____

In case of emergency, I hereby give permission to the physician to render treatment. Should the physician deem necessary, I authorize hospitalization, anesthesia, surgery or injection of medication.

Signature (Parent, if minor)

Date

Name of person to contact (Commander or Adult) on premises for information: _____

Southern New England Ministry Network
Photo & Video Release Form

I hereby grant the Southern New England Ministry Network (SNEMN) and Royal Rangers (RR) permission to the rights of my image, likeness and sound of my voice as recorded on audio or video without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image or recording.

I agree that the SNEMN & RR may use such images, video and/or audio of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.

By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to bound thereby. I hereby release, defend, hold harmless and indemnify the SNEMN & RR from any and all claims for utilizing this material.

Child's Full Name: _____

Street Address/PO Box: _____

City: _____ State/Province: _____ Postal/ZIP Code: _____

Phone Number: _____ Email Address: _____

Child's Signature: _____

If this release is obtained for someone under the age of 18, then the signature of that person's parent or legal guardian is also required.

I verify that I am the parent/guardian of the minor named above and have the legal authority to execute the above release. I have read this release and fully understand its contents. I approve the foregoing and waive any rights in the premises.

Parent/Legal Guardian Signature: _____ Date: _____