

Ranger Essentials Registration Form

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____

Email _____

Emergency Contact Name _____

Emergency Contact Phone Number _____

Church Name _____ OP # _____

Outpost Position(s) _____

Number of years in Rangers as leader _____ as boy _____

Amt. enclosed (\$20 if postmarked by **April 17, 2025**; \$25 thereafter) _____

Ranger Essentials Date: **May 3, 2025**

Location: **New Life**, 407 Schuylkill Ave, Tamaqua, PA 18252 Time: 8:30am sharp

Make checks payable to "PennDel Royal Rangers"
Mail or email this registration form to:

PennDel Royal Rangers
c/o Steve Steffel
507 Howell School Road
Bear, DE 19701