



Quebec Conference Pathfinder Council Yearly Club and Staff Registration

Club Name: _____ Date: _____

Church Name: _____

Regular club meeting: _____ Time: _____ Place: _____
Day of the week

Number of members:

Staff:	Men: _____	Women: _____	Total: _____
MITs* (Ages 16 & plus):	Men: _____	Women: _____	Total: _____
Pathfinders (Ages 10-12):	Boys: _____	Girls: _____	Total: _____
(Ages 13-15):	Boys: _____	Girls: _____	Total: _____



[Number of Pathfinders involved in the Teen Leadership Training (TLT) program?

Boys: _____ Girls: _____ Total: _____

Club Registration : \$50.00/year (\$60.00 after March 31) Yearly regular amount: \$ _____
Total Amount: _____

Payment mode:

Cash (exact amount) Check made by the Local Church Treasurer

Credit Card:

Visa Master Card

Card Number: _____ Expiration Date: _____
(Month/Year)

Cardholder Name: _____ Signature: _____

* Master Guide in training

Send the form to the Pathfinder Ministries Department

Quebec Conference

E-mail:

atheodore@sdaqc.org

940, ch. Chambly

dnadeau@sdaqc.org

Longueuil, QC J4H 3M3

Fax: 450-651-2306

FOR OFFICE USE ONLY

Date received: _____ Payment received \$ 50 \$ 60

Pathfinder Yearly Registration (3 pages) Revised in January 2018

Club: _____ Church: _____

Pathfinder Club Staff

The following individuals are currently serving as officers, staff, and volunteers of our Pathfinder Club. They desire to be registered with the Quebec Conference Council for the year 20____.

Last Name	First Name	Telephone/E-mail	Background Checks done	Club Office
			<input type="checkbox"/> Yes	Director
			<input type="checkbox"/> Yes	Assistant Director
			<input type="checkbox"/> Yes	Deputy Director
			<input type="checkbox"/> Yes	Chaplain
			<input type="checkbox"/> Yes	
			<input type="checkbox"/> Yes	
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