

Southern California Conference Adventurer Club Monthly Report
This report must be postmarked, emailed or faxed by the 10th of the following month

Church Name: _____ Report for Month of: _____

Membership: Boys _____ Girls _____ Staff: Men _____ Women _____

Day of Meetings: _____ Time: _____

Number of meetings: (minimum of 2 per month) _____

Class Work: (How many in each class)

Awards Working On: (Specify)

Little Lamb _____
 Eager Beaver _____
 Busy Bee _____
 Sunbeam _____
 Builder _____
 Helping Hand _____
 Helping Hand Adv. _____

Crafts Working On: (these are not to be crafts that are connected to the awards)

Field Trips/Official Church Activities: (Do not list Conference events here)

- | | | |
|--|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> Did you have worship before your meetings? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Did you have at least 80% in attendance: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Was Uniform worn during meetings (Field or Class A)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Did you have parent/child activities? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Did you hold a monthly staff meeting? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Did your club attend a Conference Activity? Yes No
 Specify and the date: _____

Give dates when the following activities are completed. Report only for the current month.

Induction _____ Registration _____

Investiture _____ Share Your Faith/Outreach _____

Authorized Signature _____

Mail this form to: Youth Ministries Dept., PO Box 969, Glendale CA 91209-0969

Fax: 818-546-8430

e-mail: sccyouth2@aol.com