

National Royal Rangers Ministries
Independent Church Charter Application
(Initial Application for Non-Assembly of God & Non-PCCNA churches)

Region: _____ District: _____ Section: _____
GPH Account #: _____ (Required for identification) Outpost #: _____
Church: _____
Church Mailing Address: _____
City: _____ State: _____ Zip: _____
Church Phone: () _____ Church Fax: () _____
Senior Pastor: _____

National Office Use ONLY
Date: _____
Date: _____

Indicate the number of boys and leaders to be chartered in each group.

RANGER KIDS (Grades K – 2)	LEADERS
DISCOVERY RANGERS (Grades 3 – 5)	
ADVENTURE RANGERS (Grades 6 – 8)	
EXPEDITION RANGERS (Grades 9 – 12)	

INSTRUCTIONS

1. A national/district registration amount of \$13.00 for each leader (including all outpost committee and leaders) must accompany this application. This includes \$3.00 charged by the district. For further details, contact your district director.*
2. A national/district registration amount of \$11.00 for each boy must accompany this application. This includes \$3.00 charged by the district. For further details, contact your district director.*

We are registering _____ leaders at \$13.00 each = \$ _____

We are registering _____ boys at \$11.00 each = \$ _____

Manual Processing Amount **\$15.00** (charged to outpost that does not charter online)

Total amount enclosed \$ _____

Make your check payable to: National Royal Rangers Ministries

Mail your check to:
National Royal Rangers Ministries
1445 N. Boonville Ave.
Springfield, MO 65802

QUESTIONS: Contact chartering coordinator
Phone: 417-862-2781 x.4177
Email: rangers@ag.org
Website: royalrangers.ag.org

*For a complete list of all your charter benefits, please visit the national ministry website at royalrangers.ag.org.

These standards set forth by the BOA September, 2004 – General Council Assemblies of God

Attention District Superintendent: The applicant on the reverse side of this form is an independent church in your district requesting approval to charter a Royal Rangers outpost. The national Royal Rangers office does not issue charter certificates to such churches without the written approval of the superintendent of the district. Please complete the following:

Royal Rangers Standards for Chartering Independent Churches

1. The senior pastor of the church making application shall send a request for Royal Rangers charter to the Assemblies of God district office, indicating church affiliation (if any). *(If unsure of district office, please call national RR office 417.862.2781 ext.4177.)*
2. Criteria for evaluating the charter request shall include:
 - A. The applicant shall be in basic agreement with the doctrinal position of the Assemblies of God.
 - B. The leadership of the applicant, as it relates to Royal Rangers, shall maintain an exemplary Christian lifestyle, being evangelistic and Pentecostal.
 - C. The applicant shall agree to work cooperatively and harmoniously with the Assemblies of God.
 - D. The applicant agrees to use unaltered the Royal Rangers program, including its organization structure and its written materials.
 - E. Chartering, when granted, is restricted to one geographical location/address as indicated on the application. Chartering is nontransferable to another geographical location/address.
3. The Assemblies of God district superintendent/district director shall notify the applicant in writing regarding the decision of the district office.

Church Representative, please read. The national Royal Rangers office strongly recommends that every outpost review and implement the recommendation for screening and supervision of leaders contained in the *Royal Rangers Leader Manual*.

Signing below, I acknowledge: (1) I have read and understood the disclaimer above; (2) I am authorized by my church to charter; and (3) Church leadership is aware I am chartering my local outpost on its behalf.

Signed: _____ (Church Representative) Date: _____

Please Print Name: _____ Address: _____

City: _____ State: _____ Zip: _____

This Application is for an Independent Church

(District Superintendent – Please check your selection below, sign, and return it to the national Royal Rangers office.)

I APPROVE this church for chartering. I DO NOT APPROVE this church for chartering.

Signed _____ (District Superintendent)

District _____ Date _____

LEADER NAME:

Mailing Address:

City: _____ State: _____ Zip: _____ Phone: ()

Email: _____ Position: _____

LEADER NAME:

Mailing Address:

City: _____ State: _____ Zip: _____ Phone: ()

Email: _____ Position: _____

LEADER NAME:

Mailing Address:

City: _____ State: _____ Zip: _____ Phone: ()

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Email: Position:

