

**Due by NOVEMBER 7, 2012**

**Adventurer Inspection Request Form**

**Awesome A's News**

**Monthly Report - October**

# **ADVENTURER INSPECTION REQUEST FORM**

CLUB \_\_\_\_\_  
DIRECTOR \_\_\_\_\_ Phone: (       ) \_\_\_\_\_

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We are requesting an Inspection of our **Adventurer Club** because we are working towards the "Club of the Year" requirements. Our Inspection will take place during our **regular meeting time**.

Day of club meeting: \_\_\_\_\_

Time of club meeting: \_\_\_\_\_

Place of club meeting: \_\_\_\_\_

**Choice of Dates:** (If your church has a Pathfinder club, please check with the director and coordinate your dates so that your Inspections can be combined.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

\_\_\_\_\_  
Director's Signature

\_\_\_\_\_  
Date



# ADVENTURER AWESOME A's NEWS

Submit your monthly club news on this form and send it along with your monthly report form. (You may also email your club news to [closolla@carolinasda.com](mailto:closolla@carolinasda.com) or submit it with your on-line monthly report @ [www.carolinasda.org](http://www.carolinasda.org) under Youth Department)

CLUB \_\_\_\_\_

DIRECTOR \_\_\_\_\_

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# ADVENTURER MONTHLY REPORT

(An on-line form is available at [www.carolinasda.org](http://www.carolinasda.org) under Youth Department)

MONTH \_\_\_\_\_

How many are enrolled in each class:

CLUB \_\_\_\_\_

Eager Beaver \_\_\_\_\_

DIRECTOR \_\_\_\_\_

Busy Bee \_\_\_\_\_

# of Adventurers \_\_\_\_\_

Sunbeam \_\_\_\_\_

# of Staff \_\_\_\_\_

Builder \_\_\_\_\_

Meeting Time \_\_\_\_\_

Helping Hands \_\_\_\_\_

Day of Meeting \_\_\_\_\_

Adv. Helping Hands \_\_\_\_\_

|  |                   |        |
|--|-------------------|--------|
| Number of Meetings this Month _____                        |                   |        |
| Worked on Class Work This Month                            | [ ] Yes           | [ ] No |
| Awards Earned During Month                                 | 1. _____ 2. _____ |        |
|  | 3. _____ 4. _____ |        |
| Crafts Completed During Month                              | 1. _____ 2. _____ |        |
|  | 3. _____ 4. _____ |        |
| Participated in a Field Trip or Other Activity This Month  | [ ] Yes           | [ ] No |
| Name of Activity _____                                     |                   |        |
| Participated in an Outreach Activity This Month            | [ ] Yes           | [ ] No |
| Name of Activity _____                                     |                   |        |
| Had a Family/Adventurer Activity This Month                | [ ] Yes           | [ ] No |
| Had a Parent Meeting This Month                            | [ ] Yes           | [ ] No |
| Had an Induction Service This Month                        | [ ] Yes           | [ ] No |
| Had an Adventurer Sabbath This Month                       | [ ] Yes           | [ ] No |
| Had an Inspection This Month                               | [ ] Yes           | [ ] No |
| Had an Investiture Service This Month                      | [ ] Yes           | [ ] No |
| Had Representation at Leadership Convention (Sept. Report) | [ ] Yes           | [ ] No |
| Had 80% Attendance at Adventurer Fun Day (Apr. Report)     | [ ] Yes           | [ ] No |

Send Report **by the 7<sup>th</sup>** of each month to:  
 Carolina Conference of SDA  
 Attn: Adventurer Dept.  
 PO Box 44270  
 Charlotte, NC 28215-0043  
 Fax: (704) 596-5775