

District Ranger of the Year Section Application Form

Section _____ Section Commander: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email Address: _____

Note to Section Commander: Please send a completed copy of this form to: Royal Rangers Georgia District, Ranger of the Year Program, 710 Cornerstone Drive, Columbus, GA 31904-1284. DATE DUE: October 1, 2007

Check the merits (3 are required for every level of ROTY) the boy chooses to be evaluated on during the ROTY event.

Discovery Ranger	Email or Phone Number	Grade	Astronomy	Insect Study	Rope Craft	Tool Craft
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					

Adventure Ranger Name	Email and Phone Number	Grade	Camp safety	Cycling	First Aid/CPR	Orienteering
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					
Name: _____ Street: _____ City, State, Zip: _____	Phone: _____ Email: _____					

