



TLT Program Application



Name _____ Home Phone _____

Address _____ City _____ Zip _____

Age _____ Date of Birth _____ Grade _____

Home Church _____ Baptized Yes No

Name of school now attending _____

School Address _____ City _____ Zip _____

Class or classes completed:

Friend Trail Friend Companion Trail Companion

Explorer Frontier Explorer Ranger Frontier Ranger

Voyager Wilderness Voyager Guide Wilderness Guide

List your participation in Pathfinder clubs:

Club	Year	Director
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I, the undersigned apply to the _____ club leadership for a position in the TLT Program. I understand that my application and future participation are evaluated on my performance in Pathfinding and my adherence to the TLT Pledge as well as the Pathfinder Pledge and Law. I agree to participate in the TIT Program as outlined in the TLT Manual and commit myself to developing my Christian leadership potential to its fullest.

Signature _____ Date _____

Official Use Only Date submitted: _____ Date to begin service: _____

Approved _____ Disapproved _____

Club Director Signature: _____