



# **PATHFINDER CLUB DIRECTOR'S MANUAL 2021**



YOUTH MINISTRIES

Seventh-day Adventist Church  
NEW JERSEY CONFERENCE

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Dear Club Leader,

As I look ahead toward 2021, I'm excited that God has chosen you to minister in such a time like this. We have experienced the world change in front of our eyes and all of us have adjust to a new way of life. You may feel inadequate during this pandemic, but God is looking for those who are willing to fill them with His Spirit and utilize them in a powerful way.

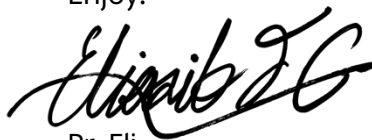
In the Bible Isaiah writes his special experience with the Lord. During that time I'm sure he had different challenges to overcome, the entire nation of Israel was facing captivity and the people were discourage and anxious, any familiar feelings? but the Lord asked: "Whom shall I send? And who will go for us?" It is a big question, because we know that today also the challenges are many, we minister young people and Families that are facing huge changes in their lives and they need to be reminded that in the mist of global crisis and social distance era we need to remain joyful because the new Jerusalem is fast approaching, and we all need to continue sharing hope and inviting others to join this movement.

I love Isaiah's answer to the question "Who will go?" He said, "Here am I. Send me!" This year our theme is a declaration of faith "I WILL GO", this is an answer to God's request of having faithful leaders ready to inspire our children and young people to serve.

I will be praying for you as we embark in a new opportunity to continue to develop young disciples for

I'm already praying for you as you say "I WILL GO" to impact the world around you.

Enjoy!



Pr. Eli  
Youth Director  
NEW JERSEY CONFERENCE OF SDAs



NEW JERSEY CONFERENCE OF SDAs  
**PATHFINDER DIRECTOR**

**Pathfinder Ministries Mission:**

To provide a church-centered, recreational-spiritual program for both boys and girls ages 10-15.

**Pathfinder Director should not be an Adventurer Director.  
These are two different ministries with two different needs and audiences.**

Candidates should demonstrate at least one of the following spiritual gifts:

*Administration*  
*Pastor/Shepherd*  
*Exhortation/Encouragement*  
*Evangelism*

Candidates should demonstrate at least one of the following passions:

*Outdoors*  
*Outreach*  
*Physical Fitness*  
*Working with the age group of 10-15-year-old.*

Candidate should possess the following qualities:

- I. Loves Jesus**
- II. Loves ministering to young people (ages 10-15)**
- III. Leadership skills**
  - A. Planning yearly Pathfinder calendar
  - B. Organizes local club meeting and events which include but not limited to-
    - Investiture Service
    - Induction Service
    - Pathfinder Sabbath
    - Support Conference Pathfinder events
  - C. Ability to plan and manage a board approved budget
  - D. Organize and lead monthly staff and parent meetings
  - E. Recruiting and supervising volunteer staff
  - F. Delegate club responsibilities among instructors and counselors
  - G. Participate of all NJCYOUTH Pathfinder activities and events

### Communication skills

Ability to communicate club vision and needs to church board and staff

Ability to communicate with parents

Ability to communicate with Pathfinder aged youth

Maintain a liaison relationship with Conference Youth Ministries and local church

Candidate must have clean record/background (must complete the free [Background Check](#)):

**\*\*\* Any history of sex offense disqualifies candidate from working with young people and children**

# NJC YOUTH MINISTRIES

2021 Calendar

JAN	9	Club Directors Meeting
	29-31	E-Awaken and Children's Ministry Training
FEB	20	Awaken LOVE
MAR	6	PBE State Level
	7	Ski Trip
	20	Global Youth Day – Local Church event
	20	PBE Union Level
	20-27	Youth Week of Prayer – Local Church event
APR	16-17	PBE Division Level
	16-18	Evangelism Film Festival
	25	Children's Ministry Convention
MAY	8	Youth Sabbath
	14- 22	Virtual youth evangelism
	15	World Adventurer Day
JUN	4-6	Adventuree
JUL	25-31	Youth camp
AUG	13-15	Pathfinder Camporee
SEP	11	Super Youth Sabbath
	10-12	Master Guide Camp
	18	Pathfinder World Day
OCT	6	Children Sabbath
	24	Children Festival
DEC	3-5	Awaken

NJC YOUTH.ORG

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## **WHAT IS NEW & REMINDERS FOR 2021**

- I. We understand that 2020 was a tough year for everybody and therefore we have chosen not to put any more stress on Directors and Staff (and as a consequence Pathfinders). We acknowledge that the whole world has gone through rapid and unexpected changes, this is why we won't have requirements to participate in this year's Camporee.
- II. Every adult helping with Pathfinders and adults/staff/volunteers/parents that will be attending the Camporee or other Pathfinder events must complete the Background Check.  
(<http://www.ncsrisk.org/adventist/>)
- III. If you are hosting an event, make sure to contact the coordinator/Youth Ministries Office at least three weeks in advance.
- IV. No need for notarized medical forms.
- V. No Club Point System.
- VI. No pre-camporee points will be needed, besides camporee registration, keep in mind that your club cannot participate if the club is not registered with the conference first.
- VII. No need for Quarterly Reports



NEW JERSEY CONFERENCE OF SDAs  
**IMPORTANT WEBPAGES**

NJCYOUTH MINISTRIES:

[www.njcyouth.com](http://www.njcyouth.com)

NEW JERSEY CONFERENCE:

[www.njcsda.org](http://www.njcsda.org)

NJCYOUTH FACEBOOK:

[www.facebook.com/pages/NJCYouth](https://www.facebook.com/pages/NJCYouth)

NAD CLUB MINISTRIES:

[www.clubministries.org/pathfinders](http://www.clubministries.org/pathfinders)

GC CLUB MINISTRIES:

[youth.adventist.org/Ministries/Pathfinders](http://youth.adventist.org/Ministries/Pathfinders)

**THEME OF THE YEAR**



*Sharing Hope*





NEW JERSEY CONFERENCE OF SDAs  
**STAFF AND STATE COORDINATOR**



**YOUTH DIRECTOR**

Eliasib Fajardo  
Efajardo@njcsda.org  
(202) 652-6279



**ASSISTANT YOUTH DIRECTOR**

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**YOUTH ADMIN. ASSIST.**

Estefany Flores  
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**STATE COORDINATOR**

Evelyn Roque  
Everoque24@gmail.com  
(201) 443-7580

**ZONE COORDINATORS**

**ZONE 1 & 2**

Evelyn Ramirez  
ramvero@optonline.net  
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**ZONE 3W**

Laurinda Jorge  
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(973) 951- 8060

**ZONE 3E**

Omar Arellano  
njomar@hotmail.com  
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**ZONE 4**

TBD

**ZONE 5&6**

Andre Taylor  
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(609) 433-2605

**ZONE 7**

TBD



# NJCYOUTH MINISTRIES

*Zones Division*



## ZONE 1

Dover Sp  
Hackettstown Eng  
Hackettstown Sp  
Lafayette Eng  
Morristown Eng  
Morristown Sp  
Parsippany Sp  
Philipsburg Eng  
Rockaway Eng  
Tranquility Eng

## ZONE 2

Clifton Sp.  
Garfield Sp.  
Hackensack Eng  
Nuevo Amanecer Sp.  
Paterson Eastside Sp  
Paterson South Sp  
Paterson Temple Sp  
Passaic I Sp  
Passaic II Sp  
Waldwick Eng  
Wayne Eng

## ZONE 3E

Bayonne Sp  
El Faro Sp  
Filipino Eng  
Filipino International  
Guttenberg Sp  
Jersey City Sp  
Jersey City Heights Sp

Jersey City Heights Eng  
La Esperanza  
Maranatha Sp  
Nuevo Amanecer Sp.\*  
Ridgefield Park  
Union City Sp  
West New York Sp

## ZONE 3W

All Nations French  
Belleville Sp  
Bethel French  
Bethesda French  
Bloomfield Sp  
Elizabeth Sp  
Elizabeth Eng  
Harrison Sp  
Irvington Sp

Luzo Brazilian  
Maranatha French  
Newark Sp  
Newark Eng  
Nueva Vida Sp  
Philadelphie French  
Port Elizabeth Sp  
Sion Sp

## ZONE 4

Bound Brook  
Carteret Sp  
Dunellen Sp  
Edison Sp  
First Bilingual  
First Filipino  
Flemington Sp  
Freehold Sp  
Indian Eng  
Indonesian Pioneer  
Lake Nelson Eng

La Victoria  
New Brunswick Eng  
New Brunswick Morija  
New Brunswick Sp  
Perth Amboy Eng  
Perth Amboy Sp  
Pioneer Community  
Eng Plainfield Sp  
Rahway Sp  
Somerville Sp

## ZONE 5

Burlington Eng  
Central NJ Korean  
Collingwood Park Eng  
Crosspoint  
Hightstown Eng  
Hightstown Sp  
Lakewood Sp  
Long Branch Brazilian

Princeton Eng  
Robbinsville Eng  
The Grace Place  
Trenton Eng  
Trenton Sp  
Trenton Korean  
West Long Branch Sp  
Willingboro

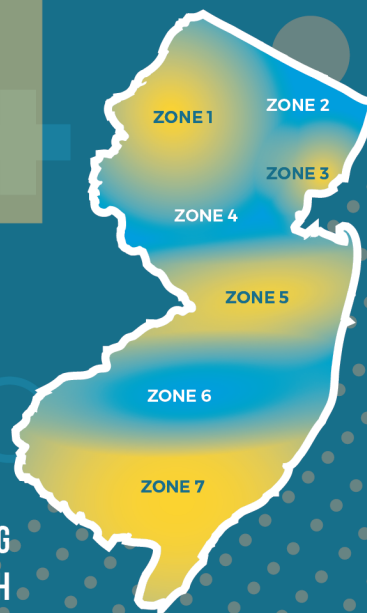
## ZONE 6

Cherry Hill Eng  
Browns Mills Eng  
Laurelwood Eng Mt  
Holly Eng  
Mt Holly Sp  
Toms River Eng  
Williamstown Eng  
Woodbury Eng

## ZONE 7

Atlantic City Sp  
Atlantic County Eng  
Bridgeton Eng  
Bridgeton Sp  
Bridgeton Sp II  
Camden Sp  
Cape May Court  
House Eng  
Swedesboro Sp

Gibbsboro Sp  
Hammonton Sp  
Panamericana Sp  
Parkway South Eng  
Pine Hill Sp  
Redemption Chapel  
Salem Eng  
Vineland Eng  
Vineland Sp



NJCYOUTH.ORG  
@NJCYOUTH

\* ONLY PATHFINDERS



UPD 10/2018 & 2019



NEW JERSEY CONFERENCE OF SDAs

## **NEW JERSEY CONFERENCE SUGGESTED LOCAL CLUB PROGRAMMING**

### **PRE-MEETING (20 MINUTES)**

- Arrange meeting room
- Review plans and theme with staff
- Check supplies
- First Aid kit should be available

### **CLUB MEETING (90 MINUTES)**

#### *Opening (15 minutes)*

- Prayer
- Pledge of Allegiance
- Pathfinder Pledge & Law
- Devotional
- Roll Call

#### *Activity (20 Minutes)*

- Craft
- Honor activity
- Team building game

**NOTE:** Please rotate the activity options every meeting

#### *Drilling & Marching (10 Minutes)*

#### *Classwork (20 Minutes)*

**NOTE:** It is suggested that you alternate with Honors

#### *Exercise (15 Minutes)*

#### *Closing (10 Minutes)*

- Announcements
- Challenge-closing thought
- Prayer

### **POST-MEETING (10-15 Minutes)**

Review meeting with staff

Plan for next meeting

# FORMS TO BE KEPT IN THE CLUB FILES





# PATHFINDER MEMBERSHIP APPLICATION 2021

This confidential information will be kept for club use only.

Directors: Please keep this application for your records when going camping or on fieldtrips.

## Membership Requirements:

- Be at least 10 and in the 5th Grade or under age 18
- Faithfully attend scheduled club activities
- Agree to follow the guidelines set forth by the local club including paying fees
- Follow the Pathfinder Pledge (*By the grace of God, I will be pure, kind, and true. I will keep the Pathfinder Law. I will be a servant of God and a friend to man.*)
- Follow the Pathfinder Law (*Keep the morning watch. Do my honest part. Care for my body. Keep a level eye. Be courteous and obedient. Walk softly in the sanctuary. Keep a song in my heart. Go on God's errands.*)

Child's Personal Information		Application Date: _____	
Last Name		First Name	
Birthdate		Age	
Grade		School	
Home Address			
Baptized?		Baptism Date	
Religious Affiliation		Home Church	
Other Personal Information?			

Parent / Guardian #1 Info		Relationship to child: _____ Does the child live with this person? _____	
Last Name		First Name	
Address		Phone #1	
Email		Phone #2	

Parent / Guardian #2 Info		Relationship to child: _____ Does the child live with this person? _____	
Last Name		First Name	
Address		Phone #1	
Email		Phone #2	

Alternate Emergency Contacts		Relationship to child: _____ Does the child live with this person? _____	
Name		Phone	
Name		Phone	



# PATHFINDER MEDICAL INFORMATION

Health Information			
Food Allergies		Medication Allergies	
Physical Restrictions		Medical Conditions	
Preferred Local Hospital		Physician (Name & Phone)	
Insurance Company		Insurance Policy Number	
Diet Restrictions			
Current Medications	Medication Name	Dose Administered	Time/Frequency Administered Reason for Administering
Health History	<input type="checkbox"/> Asthma <input type="checkbox"/> Hay Fever <input type="checkbox"/> Sinus Trouble <input type="checkbox"/> Earache <input type="checkbox"/> Ear Tubes <input type="checkbox"/> Fainting <input type="checkbox"/> Tuberculosis <input type="checkbox"/> Diarrhea <input type="checkbox"/> Bedwetting <input type="checkbox"/> Kidney Disease <input type="checkbox"/> Constipation <input type="checkbox"/> Stomach Ache <input type="checkbox"/> Diabetes <input type="checkbox"/> Sleepwalking <input type="checkbox"/> Epilepsy <input type="checkbox"/> Rheumatic Fever <input type="checkbox"/> Heart Trouble <input type="checkbox"/> Glasses/Contacts <input type="checkbox"/> Menstrual Problems <input type="checkbox"/> Bee Sting Allergy <input type="checkbox"/> Poison Oak/Ivy Allergy <input type="checkbox"/> Other: _____		
Past Illness/Surgery Hospitalization/			
Immunizations	<input type="checkbox"/> DTP Series <input type="checkbox"/> Polio/OOPV <input type="checkbox"/> Measles <input type="checkbox"/> German Measles/Rubella <input type="checkbox"/> Tetanus <input type="checkbox"/> Tuberculin Test <input type="checkbox"/> Mumps <input type="checkbox"/> Chicken Pox <input type="checkbox"/> Other: _____		
Other Health Information?			

## Approval Section:

### Parent/ Guardian Consent:

As a parent or legal guardian of \_\_\_\_\_, I am in favor of him/her attending all club functions and accept the membership conditions named above. In consideration of the benefits derived from membership, I hereby voluntarily waive any claim against the club of the New Jersey Conference of Seventh-day Adventists for any accidents which may arise in connections with the activities of the Pathfinder Club. (This does not waive coverage within the policy limits of church accident insurance, which covers church sponsored activities.) The health history as stated is correct as far as I know, and the person herein described has permission to engage in all prescribed club activities. I give permission for my child to be photographed and his/her picture posted on club and New Jersey Conference of SDA social media and web sites. I will assist the applicant in observing the rules of the Pathfinder organization and will encourage him/her to take part in all club activities. I agree to pay the fee required for Pathfinder membership with the conference. Permission for photo copying this information and health record is granted for use by the Pathfinder Club only. I also consent for my child to be transported for club activities, in private, church owned vehicles or other mode of transportation.

### Authorization to Treat a Minor:

I (we) the undersigned parent or legal guardian of \_\_\_\_\_, in case of emergency, hereby give permission to the physician selected by the club director to hospitalize, secure proper treatment, and to order injections or anesthesia for my child. The health history as stated above is correct as far as I know. A photocopy of this shall be valid as the original. I consent for club staff to administer over-the-counter drugs at their discretion with parent notification.

Parent/Guardian Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_



NEW JERSEY CONFERENCE OF SDAs

# VOLUNTEER STAFF APPLICATION FORM

Personal Information		Application Date: _____	
Last Name		First Name	
Birthdate		Phone	
Address			
Email			
Marital Status		Name of Spouse	
Name/Age of Children			
Religious Affiliation		Home Church	
Do you now have, or have you had any injury/sickness that might limit your involvement in Children's/Youth Ministries activities? YES or NO If YES, Describe:			
Have you ever been accused, charged, or disciplined for any unlawful sexual conduct, child abuse, and/or child sexual abuse? YES or NO If YES, Describe:			

Work Experience That Would Qualify You to Work with Children / Youth:			
Job Title	Description of Duties	Date	Location

References who can verify you are suitable for work with Children / Youth:			
Pastor:	City:	State:	Phone:
Name:	City:	State:	Phone:
Name:	City:	State:	Phone:

Verified Volunteers		
Every adult age 18+ should complete the Verified Volunteers training & background check at <a href="http://www.ncsrisk.org/adventist/">http://www.ncsrisk.org/adventist/</a> and provide proof of completion.	Date Completed	

I have read and understand the Personal Vehicle Usage Recommendations (Please initial to the right)	
Note: Volunteer staff cannot begin work until their background and driving record checks have cleared. The above information is accurate to the best of my knowledge. I understand the information will be kept confidential in my club files.	
Signature: _____	Date: _____



# VOLUNTEER STAFF MEDICAL INFORMATION

Each staff member should complete the following form.

This confidential information is for club use only and will not be provided to the conference office.

<b>Name:</b>											
<b>Health Information</b>											
<b>Food Allergies</b>		<b>Medication Allergies</b>									
<b>Physical Restrictions</b>		<b>Medical Conditions</b>									
<b>Preferred Local Hospital</b>		<b>Physician (Name &amp; Phone)</b>									
<b>Insurance Company</b>		<b>Insurance Policy Number</b>									
<b>Diet Restrictions</b>											
<b>Current Medications</b>	<table border="1"> <thead> <tr> <th>Medication Name</th> <th>Dose Administered</th> <th>Time/Frequency Administered</th> <th>Reason for Administering</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="height: 100px;"></td> </tr> </tbody> </table>			Medication Name	Dose Administered	Time/Frequency Administered	Reason for Administering				
Medication Name	Dose Administered	Time/Frequency Administered	Reason for Administering								
<b>Health History</b>	<input type="checkbox"/> Asthma <input type="checkbox"/> Hay Fever <input type="checkbox"/> Sinus Trouble <input type="checkbox"/> Earache <input type="checkbox"/> Ear Tubes <input type="checkbox"/> Fainting <input type="checkbox"/> Tuberculosis <input type="checkbox"/> Diarrhea <input type="checkbox"/> Bedwetting <input type="checkbox"/> Kidney Disease <input type="checkbox"/> Constipation <input type="checkbox"/> Stomach Ache <input type="checkbox"/> Diabetes <input type="checkbox"/> Sleepwalking <input type="checkbox"/> Epilepsy <input type="checkbox"/> Rheumatic Fever <input type="checkbox"/> Heart Trouble <input type="checkbox"/> Glasses/Contacts <input type="checkbox"/> Menstrual Problems <input type="checkbox"/> Bee Sting Allergy <input type="checkbox"/> Poison Oak/Ivy Allergy <input type="checkbox"/> Other: _____										
<b>Past Illness/Surgery Hospitalization/</b>											
<b>Immunizations</b>	<input type="checkbox"/> DTP Series <input type="checkbox"/> Polio/OOPV <input type="checkbox"/> Measles <input type="checkbox"/> German Measles/Rubella <input type="checkbox"/> Tetanus <input type="checkbox"/> Tuberculin Test <input type="checkbox"/> Mumps <input type="checkbox"/> Chicken Pox <input type="checkbox"/> Other: _____										
<b>Other Health Information?</b>											

<b>Emergency Contact 1</b>			
<b>Name</b>		<b>Phone 2</b>	
<b>Phone</b>		<b>Relationship</b>	

<b>Emergency Contact 2</b>			
<b>Name</b>		<b>Phone 2</b>	
<b>Phone</b>		<b>Relationship</b>	





## NEW JERSEY CONFERENCE OF SDAs **PERSONAL VEHICLE USAGE RECOMMENDATIONS**

Please provide a copy of this document to every potential driver. Drivers must:

- Be at least 21 years of age
- Have a valid driver's license and current vehicle insurance.
- Verify that the vehicle is in good working order (tires, wiper blades, all lights, etc.).
- Require occupants to wear seatbelts.
- Not engage in "distracted driving" (no cell phone, texting, eating, drinking, reading, navigation system adjustments, or boisterous children disciplined while the vehicle is in motion).
- No overloaded vehicles.



For long trips, ensure that there are sufficient drivers so that no one is required to drive more than 11 hours at a stretch.

If someone other than the owner will be driving the vehicle, obtain information on the owner's insurance (company name, policy number, and policy term) and give this information to the person who will be driving the vehicle. The driver will need this information if an accident occurs. Adventist Risk Management does not recommend the use of non-owned autos on approved events. If non-owned vehicles are used, however, adhere to the following guidelines: Adventist Risk Management's auto insurance policy provides coverage for non-owned vehicles on an excess basis. It is designed to protect the organization, not the vehicle owner. In the event of an accident, the vehicle owner must go to his/her insurance company first.

Make sure drivers understand that their personal auto insurance is "primary" and that his/her insurance is responsible for any damage done by the vehicle or to the vehicle. Agree with the owner or driver on who will be responsible for any comprehensive or collision deductibles that might apply to damage done to the borrowed vehicle.

Every insurance policy contains limits, conditions, and exclusions. Read the policy carefully, because it may not respond to all claims for damage.



## NEW JERSEY CONFERENCE OF SDAs

# GUIDELINES FOR VOLUNTEERS & CAREGIVERS

Directors: Please keep this form for your records

Because our society is filled with pain, problems, and litigation caused by improper conduct of adults working with children and youth, it is imperative that those working with children at church have meaningful guidelines for conduct – to protect both themselves and those under their care. As a ministry volunteer, you want parents and others to feel comfortable and confident with you. Here are some practical guidelines:

1. ***Never leave alone a child – or group of children – for whom you are responsible.***  
Provide adequate supervision at all times, no matter what.
2. ***NEVER be the only adult*** serving as a caregiver – ALWAYS have at least one other person 18 or older with you.
3. ***Always ask a person's permission before touching*** him/her anywhere, even when responding to an injury or problem. This is especially true for any area that would normally be covered by a T-shirt and shorts. If an injury is within this area, make sure another adult works with you as you provide care.
4. ***Physical and verbal attack are inappropriate*** and should not ever be used as discipline. "Time out" or "sit-in-that-chair" may be helpful methods with children.
5. ***Kids need to be touched appropriately.*** However, keep hugs brief and "shoulder-to-shoulder" or side-to-side." Always keep your hands at (not below) the shoulder level. A caregiver kiss is to the forehead or cheek only – not elsewhere. For small children who like to sit on laps, encourage them to sit next to you.
6. ***When taking small children to the bathroom*** – take another adult along or leave the door open.

**Be aware of the signs and symptoms of abuse; be aware of the legal requirements in your locality for reporting child abuse.** In nearly all places, a caregiver can be held legally responsible for failing to report suspected or actual child abuse.

Be loving, kind, firm, and always thoroughly professional as a caregiver. Working with children and youth at church is not only a privilege; it is also a deep responsibility that must be approached with utmost care.

Adventist Risk Management and the North American Division Secretariat mandate the following rules for leaders. These serve as a protection to you and your ministry against charges of abuse:

- ***The volunteer screening rule.*** All volunteers must complete the screening process described on the Volunteer Ministry Information Form.

(<https://adventistyouthministries.org/files/safety-guidelines/NAD-Guidelines-and-Procedures-For-Well-Trained-Staff.pdf>)

- ***The six-month rule.*** Do not recruit a volunteer who has been a church member for less than six months.
- ***The two-person rule.*** Have at least two adults present always.
- ***The glass window rule.*** If the door to a classroom does not have glass in or around it, the door should be left open, so that the teacher is in full view.

**I, the undersigned caregiver, have read the guidelines listed above and agree to abide by them. I will obtain a copy of this signed form and keep it for reference**

Signed\_\_\_\_\_Date\_\_\_\_\_

## NEW JERSEY CONFERENCE OF SDAs

This checklist is designed to help club directors ensure that all volunteer staff paperwork has been collected from each individual.

[illegible]

# FORMS TO BE SENT TO THE NEW JERSEY CONFERENCE





## PATHFINDER CLUB YEARLY APPLICATION

Sponsoring Church: \_\_\_\_\_ Club Name: \_\_\_\_\_ Year: \_\_\_\_\_

Church Address: \_\_\_\_\_

Pastor: \_\_\_\_\_ Phone: \_\_\_\_\_

Elected Club Director: \_\_\_\_\_ Phone: \_\_\_\_\_

Director's Mailing Address: \_\_\_\_\_

Director's Email: \_\_\_\_\_

Complete the Online form on our website at <http://www.njcyouth.org/clubregistration>  
As an alternative, mail this Form & the Certificate of Membership Form by **February 28, 2021**:

**Mail to:** New Jersey Conference of SDAs Youth Department  
2303 Brunswick Ave., Lawrenceville, NJ 08648

- Certificate of Membership Form (Specifying the class the Pathfinder belong to)
- Pathfinder Club Yearly Application
- Pay \$10 fee for each person listed on Certificate of Membership Form through Check, Money Order, cash or Paypal (if you register online).
- **Note:** Extra insurance can be purchased from Adventist Risk Management for short term travel and recreational sports. Visit <https://adventistrisk.org/en-US/Insurance> for more information.
- **Note:** Volunteer staff cannot begin work until their background and driving record checks have cleared. Contact your local pastor or call the Conference Adventist Risk Management representative for confirmation.

### The Purpose of Pathfinding is:

- To involve youth of grades 5-12 in Christian group activities and active, selfless service.
- To lead its members into a growing and redemptive personal relationship with God.
- To build its members into responsible, mature individuals that are capable of Christian leadership.

### The Church's Commitment to Pathfinding:

We, the undersigned, have read, understand, and are in full agreement with the above Philosophy of Pathfinding. We agree to support our club with the means that the Lord has given this church. This includes finances, staff volunteers, a meeting place, transportation for outings, and any other needs as may arise in the fulfillment of this ministry.

### Signatures:

Church Pastor: \_\_\_\_\_ Date: \_\_\_\_\_

Head Elder: \_\_\_\_\_ Date: \_\_\_\_\_

Church Clerk: \_\_\_\_\_ Date: \_\_\_\_\_

Club Director: \_\_\_\_\_ Date: \_\_\_\_\_

**Club Members** (check all categories that apply and write name of progressive class for each Pathfinder)

[illegible]





# FORMS FOR THE CLUB DIRECTOR





NEW JERSEY CONFERENCE OF SDAs

# PATHFINDER UNIFORM INSPECTION

Church Name: \_\_\_\_\_ Club Name: \_\_\_\_\_

Directors Name: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

Number of total members: \_\_\_\_\_ Total members present: \_\_\_\_\_

Inspector Signature: \_\_\_\_\_

Uniform	Good	N/A	Improve
Hair/Nails well kept			
Staff/Girls/Boys Pathfinder khaki uniform shirt			
Patches properly placed and sewn			
Club Scarf and Slide			
Staff/boys black neck ties			
Staff/girls black neck ties			
Staff/Girls black skirt			
Staff/Boys black pants			
Sash/Name Tag			
Class pins			
Black Pathfinder belt			
Staff/girls black pantyhose			
Staff/boys black socks			
Staff/Girls/Boys plain black dress shoes			
Uniform is well ironed and well presented			
TLT patches, pin and cord			
Directors cord			

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



NEW JERSEY CONFERENCE OF SDAs

## PATHFINDER UNIFORM GUIDELINES

These are the general guidelines for Class A Pathfinder Uniform:

### 1. Basic Requirements

- a. Official uniform top: **Khaki shirt** and **Khaki Blouse** must be consistent with the design, color and pattern specification as outlined by the North American Division.
- b. Official uniform bottom: **Black Pants** and **Black Skirt** must be complete with official male and female belts respectively, consistent with the design, color, and pattern specification as outlined by the North American Division.
- c. A **plain black neck tie**, (without decorations and design) or the special **Pathfinder** or **Master Guide** tie, for male staff, and the regular **Tuxedo Tie**, for female staff, is required for the staff uniforms.
- d. Official **Yellow Pathfinder Neckerchief** worn around the neck and held in place with a **Pathfinder** slide; or the official **Master Guide** scarf complete with an official **Master Guide** slide for those staff wearing the **Master Guide** uniform, with the 'ends' of the neckerchief should be neatly rolled or folded. The scarf must be centered in the front and back.
- e. The **club name crest**, **position strip** (for staff only) and the **Pathfinder emblem**, are to be worn on the top right sleeve and spaced as stipulated in the Pathfinder Staff Manual.
- f. The **Conference patch**, **Pathfinder world emblem**, and the **Pathfinder class insignia (chevron)**, to be worn on the top left sleeve.
- g. The **Class Name strip** should be centered immediately in the top of the flap of the left breast pocket.
- h. The **Pathfinder class pin(s)**, should be worn on the flap of the left breast pocket; positioned to the right in the top half, and in descending order from right to left. The **Baptismal pin**, if any, is worn to the left breast pocket flap, to the left across from the class pins.

**NOTE:** The Class Name Strip for the highest class achieved **MUST** have the complementary Class pin on the flap of the left breast pocket and the Class insignia (Chevron) on the left sleeve. Alternately, additional insignias (prior class name strips, class pins and class chevrons, as well as advanced class bars), may be worn on the sash.

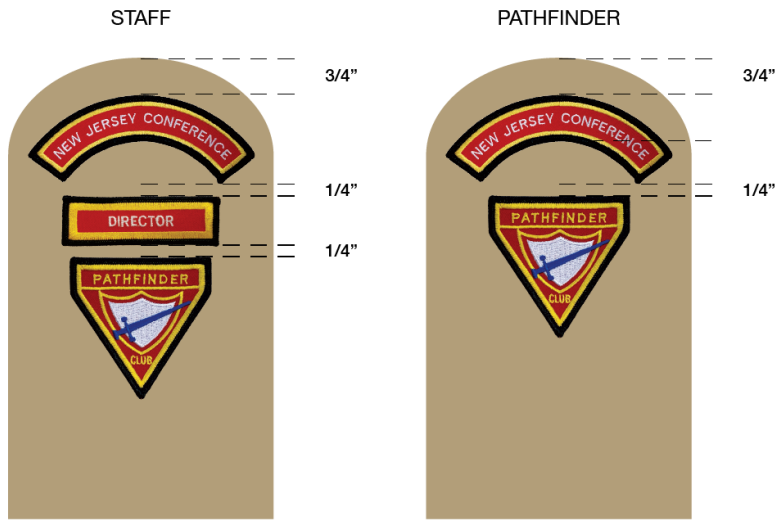
- i. The **Advanced Class Ribbon(s)** worn above the Class name strip and centered.
- j. The **Good Conduct Ribbon** worn above the **Advance Class Ribbon(s)** and centered.

- k. The **Name Plate**, should be positioned immediately on the right breast pocket. In the event there is not a right breast pocket (as in many blouses), the Name Plate is to be placed in a position on the sash, similar to the pocket. Only official name plates, approved by the NJCYOUTH should be worn.
- l. The **Black Honor Sash** is to be worn diagonally across the chest from the right shoulder (and may be neatly fastened to the epaulet). The lower point of the sash should not extend below the finger tips on the left hand. All items on the sash, must be neatly positioned, securely fastened and pleasant in appearance. The **Camporee patch** from the last camporee attended may be worn on the front.
- m. The official **black Beret** with Pathfinder emblem is the only head wear allowed.
- n. **Black shoes** (polishable, laced type) and **black socks** are standard. Sneakers are unacceptable. Stockings, tights or panty-hose are to be plain styled in black or off-black color. **Shoe heels** should not exceed two inches in height.
- o. **Finger nails** should be clean, neatly cut at a point not exceeding the fingertip, and natural.
- p. **Hair** should be well groomed, modestly styled and free from excessive ornamentation or markings.
- q. The **Director Golden non-metallic Cord** must be worn under the left sleeve epaulette.

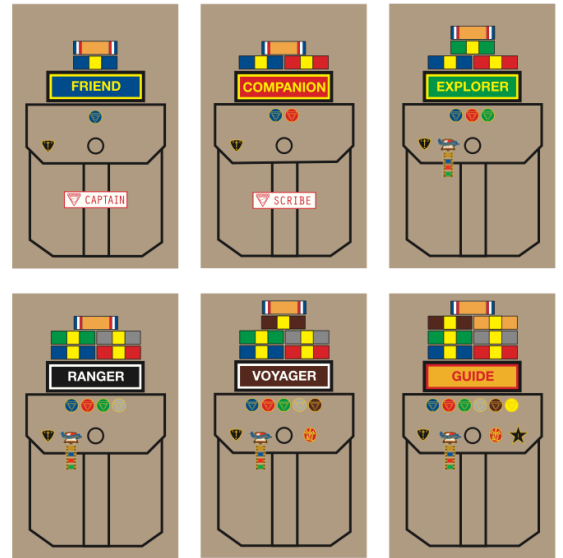
## 2. Optional Requirements

- a. All **jewelry** is prohibited, except for the wedding band in case of married staff.
- b. If a **beret with pathfinder emblem, turtleneck sweater, honor sash, plain black or tuxedo tie for pathfinder**, if worn, **must** be uniform throughout the club. Uniformity in this area, at least within the unit, must be maintained, nonetheless.

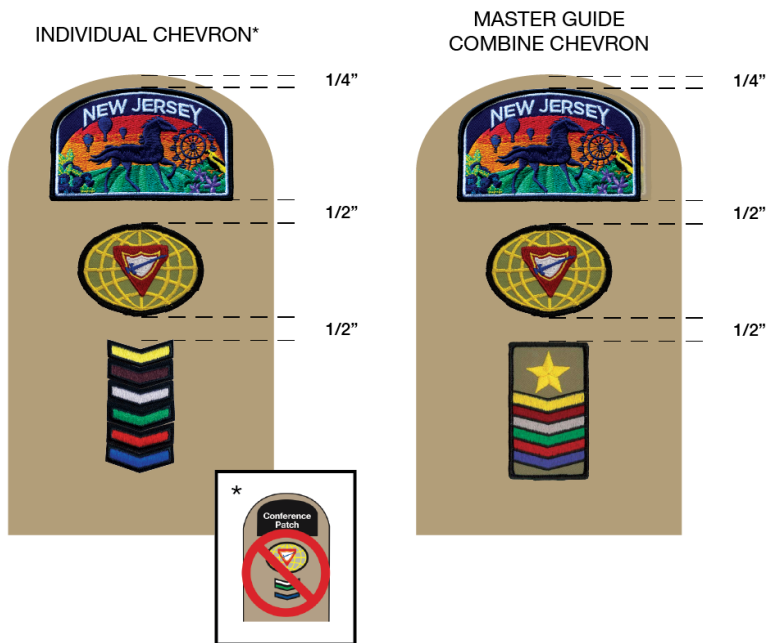
## RIGHT SLEEVE



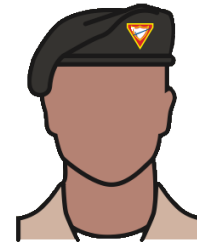
## LEFT POCKET



## LEFT SLEEVE



## PROPER BERET SETTING



# NEW JERSEY CONFERENCE OF SDAs

## PATHFINDER CLUB INDUCTION



Church Name: \_\_\_\_\_ Club Name: \_\_\_\_\_

Directors Name: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

Number of total members: \_\_\_\_\_ Total members present: \_\_\_\_\_

*Note: This inspection MUST be done by a Zone Coordinator or a Master Guide appointed by Zone or State Coordinator.*

Inspector Signature: \_\_\_\_\_

Uniform	Good	N/A	Improve
Hair/Nails well kept			
Staff/Girls/Boys Pathfinder khaki uniform shirt			
Patches properly placed and sewn			
Club Scarf and Slide			
Staff/boys black neck ties			
Staff/girls black neck ties			
Staff/Girls black skirt			
Staff/Boys black pants			
Sash/Name Tag			
Class pins			
Black Pathfinder belt			
Staff/girls black pantyhose			
Staff/boys black socks			
Staff/Girls/Boys plain black dress shoes			
Uniform is well ironed and well presented			
TLT patches, pin and cord			
Directors cord			

**ENTIRE CLUB MUST HAVE COMPLETE UNIFORM.**

Any new members should be well presented & have proper pants/skirts & blouses, socks & shoes, everything else is excusable.

Notes:

Induction	Good	N/A	Improve
Explanation of Classes by Teachers/Instructors			
Law Explanation by Pathfinders			
Pledge Explanation by Pathfinders			
Lighting of the Candles			
Scarf Placement			
Prayer			

Scarf placement MUST be done by Master Guides ONLY.

Notes:

Entrance	Good	N/A	Improve
Starts ON TIME			
Color guards			
Commands are being called out properly by an MC			

Club should be organized & should start at time given to Inspector. 1 point will be deducted for every minute tardy

Notes:

Ceremony	Good	N/A	Improve
Pledge of Allegiance			
Christian Pledge			
Bible Pledge			
Pathfinder Pledge			
Pathfinder Law			
Opening Prayer			
Pathfinder Song			
Devotional is Pathfinder oriented			

CLUB TIP: Run through your program at least once before the actual ceremony. Reach out to a coordinator if you need assistance

Notes:

Presentation	Good	N/A	Improve
Director & club are prepared			
Club & Flag Banners Present			
Director is organized			
Club is in COMPLETE uniform			
Club is disciplined & orderly			

Organization is key to a great program!

Notes:

# NEW JERSEY CONFERENCE OF SDAs

## PATHFINDER SABBATH



Church Name: \_\_\_\_\_ Club Name: \_\_\_\_\_

Directors Name: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

Number of total members: \_\_\_\_\_ Total members present: \_\_\_\_\_

*Note: This inspection MUST be done by a Zone Coordinator or a Master Guide appointed by Zone or State Coordinator.*

Inspector Signature: \_\_\_\_\_

Uniform	Good	OK	Improve
Hair/Nails well kept			
Staff/Girls/Boys Pathfinder khaki uniform shirt			
Patches properly placed and sewn			
Club Scarf and Slide			
Staff/boys black neck ties			
Staff/girls black neck ties			
Staff/Girls black skirt			
Staff/Boys black pants			
Sash/Name Tag			
Class pins			
Black Pathfinder belt			
Staff/girls black pantyhose			
Staff/boys black socks			
Staff/Girls/Boys plain black dress shoes			
Uniform is well ironed and well presented			
TLT patches, pin and cord			
Directors cord			

ENTIRE CLUB MUST HAVE COMPLETE UNIFORM.  
Any new members should be well presented & have proper pants/skirts & blouses, socks & shoes, everything else is excusable.

Notes:

Ceremony	Good	OK	Improve
Theme is present (No specific theme)			
Pathfinders are participating throughout the program			
Pathfinder or Pathfinders preaching			

It is very important that our children participate on their special day

Notes:

Presentation	Good	OK	Improve
Club Banners/Flags			
Pathfinder Pledge			
Pledge of Allegiance			
Christian Pledge			
Bible Pledge			
Pathfinder Law			
Pathfinder Song			
Opening/Closing Prayer			

Everything should be placed in the correct order.

Notes:

# NEW JERSEY CONFERENCE OF SDAs

## PATHFINDER INVESTITURE



Church Name: \_\_\_\_\_ Club Name: \_\_\_\_\_

Directors Name: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

Number of total members: \_\_\_\_\_ Total members present: \_\_\_\_\_

**NOTE: Investiture achievement must be reviewed by Coordinator or Master Guide appointed by zone or state coordinator prior to the investiture.**

Inspector Signature: \_\_\_\_\_

Entrance	Good	N/A	Improve
Starts ON TIME			
Color guards			
Commands are being called properly			

Club should be organized & should start at time given to Inspector. 1 point will be deducted for every minute tardy

Notes: \_\_\_\_\_

Uniform	Good	N/A	IMPROVE
Hair/Nails well kept			
Staff/Girls/Boys Pathfinder khaki uniform shirt			
Patches properly placed and sewn			
Club Scarf and Slide			
Staff/boys black neck ties			
Staff/girls black neck ties			
Staff/Girls black skirt			
Staff/Boys black pants			
Sash/Name Tag			
Class pins			
Black Pathfinder belt			
Staff/girls black pantyhose			
Staff/boys black socks			
Staff/Girls/Boys plain black dress shoes			
Uniform is well ironed and well presented			
TLT patches, pin and cord			
Directors cord			

Entire Club MUST have complete uniform.

Notes: \_\_\_\_\_

Ceremony	Good	N/A	Improve
Pathfinder Song			
Pledge of Allegiance			
Christian Flag Pledge			
Bible Pledge			
Pathfinder Pledge			
Pathfinder Law			
Class Presentation/Memory Work			
Investiture- pin placement			
Devotional is oriented towards the Pathfinders			

All flags should be present & properly placed.

Pin placement should be performed by Master Guides ONLY

Notes: \_\_\_\_\_

Presentation	Good	N/A	Improve
Club Flag/Banners Present			
Organization			
Director/Staff are prepared			
Entire Club is in FULL Uniform			
Discipline & Ordinance from Staff and Pathfinders			

CLUB TIP: Run through your program at least once before the actual ceremony. Reach out to a coordinator if you need assistance

Notes: \_\_\_\_\_





NEW JERSEY CONFERENCE OF SDAs  
**PATHFINDER OF THE YEAR 2021**

I certify that the Pathfinder\_\_\_\_\_has completed the following requirements for  
*Pathfinder of the Year* Award.

Pathfinder must have acquired 90% of the total points for the club. This should include.

- \*Attendance
- \*Dues
- \*Uniform neat, clean, and well-groomed
- \*Working on AY classwork and honors.
- \*Attendance on local club functions
- \*Attendance at both Youth Convention and One Day Camporee
- \* Invested in one class during current year.
- \*Earn at least two extra honors within current Pathfinder year.
- \*Be a club member for one full year.
- \*Be an outstanding example regarding courtesy, kindness, obedience and an example to others at home, school, church and Pathfinder meetings.

Write a short essay as to why you feel that this Pathfinder should be selected as conference Pathfinder of the Year.  
Give specific examples.

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Church\_\_\_\_\_Club Name\_\_\_\_\_

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

**NOTE: All applications must be received by December 1, 2021 to be considered for the  
NJC Pathfinder of the Year Award.**

Please mail to:  
New Jersey Conference of Seventh-day Adventists  
Youth Ministries Department  
2303 Brunswick Ave.  
Lawrenceville, NJ 08648  
or email to: youth@njcsda.org



## NEW JERSEY CONFERENCE OF SDAs **PATHFINDER OF THE YEAR GUIDELINES**

The NJC Pathfinder of the Year program should be the central focus on the planning for the entire Pathfinder year activities. On registration night, it should be explained to parents and Pathfinders.

The NJC Pathfinder of the Year award is given to the young person who, on his or her initiative without prodding, desires to receive the award. The requirements are not intended to be easy and are designed to present a challenge to the Pathfinder who is exceptional in all aspects of life and desires in every way to be an “outstanding” individual.

All Pathfinders should be encouraged to complete these requirements. They are all within reach. This award should be highly coveted and those receiving it must be deserving of it. It is the intent of this program to encourage excellence among our young people.

In reviewing the requirements for the NJC Pathfinder of the Year, you will note that a minimum of four honors must be taught to all Pathfinders during the year and one additional honor must be earned on his/her efforts. Also, note that a regular Pathfinder level and advanced Pathfinder level must be earned. Spiritual and “Share Your Faith” activities must be performed.

The Pathfinder director must realize that this is an award for an **exceptional Pathfinder**. The program must be explained, and each Pathfinder encouraged to participate. However, this is not an award for the person who must be constantly reminded and prodded to meet the requirements.

If a Pathfinder has met all the requirements of this award, but does not have a positive attitude toward Pathfinding, he/she should not be considered for this award. Throughout the entire Pathfinder year, the director and staff should be looking closely at all Pathfinders to determine what kind of attitude the Pathfinder under consideration might have.

The Pathfinder to receive this award must be approved by a majority vote of the local Pathfinder club staff based on personal observation and the Pathfinder’s evaluation sheets. This puts the decision on the total staff so that no one person must bear the responsibility.

**Pathfinder of the Year Form needs to be mailed to the  
NJ Conference Youth Ministries Office and received by December 1, 2021.**



And the King will say,  
"I tell you the truth, when you did it to one  
of the least of these my brothers and sisters,  
you were doing it to me!"

MATTHEW 25:40