

FRONTIERSMEN CAMPING FELLOWSHIP
North Carolina Royal Rangers
Old Hickory Chapter FCF
 Recommendation For Advancement To Buckskin



 Rangers Name

 Today's Date

 Address

 E-mail

 City State Zip

 Spouse's Name, If Married

(_____) _____
 Phone Age Birth date Date Joined RR

Complete the following section by providing the date each requirement was earned.

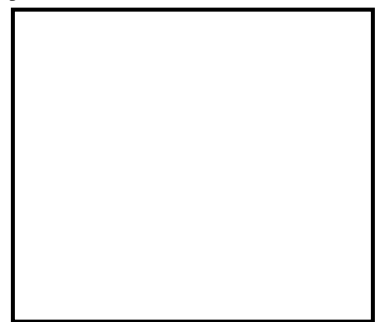
Boys Only

Bronze Medal or Expedition Ranger Medal _____
 Date Received

Men Only

Leader's Medal of Achievements _____
 Date Received

Boy Sponsored _____
 Name



Draw your totem in the box.

Boys and Leaders

Knife And Hawk _____
 Date Received

Church _____
 Date Received

Black Powder or Archery _____
 Date Received

When Submitting this application, please include a photo of yourself in your FCF outfit.

Outpost # _____, of _____ in _____
 (Church Name) (City)

_____, recommends that Ranger _____
 (State) (Name)

be considered for admission into the Frontiersman Camping Fellowship.

 (Pastor's Signature) and _____
 (Senior Commander's Signature)

 (District FCF Officer Signature) Sponsor's Name and E-mail (preferred) or phone

Senior Pastor: Applicant (Commanders only) is morally and spiritually fit to the best of my knowledge and has never been involved in any immoral or improper relationships with boys or girls or youth. I confirm that we have done a background check and have an approved Children's Worker Application on file for this person.

Yes No

Mail to : Troy (Missionary Rock) Dill, FCF Buckskin Rep, 6 Rash Road, Asheville, NC 28806 Revised 6/6/08

For questions about this application and deadline information, contact the Rep at 828-450-1089 or at mailto:troy_dill@hotmail.com?subject=Buckskin Application.

For Official Use Only

For the following, enter the number or circle Yes or No.

Frontier Adventure participated in _____ Complete Outfit Yes No _____
Number Reviewer's Initials

FCF Pledge Yes No _____ FCF Symbol Yes No _____
Reviewer's Initials Reviewer's Initials

FCF Vision, Purpose Yes No _____ ID Staff Yes No _____
Reviewer's Initials Reviewer's Initials

Craft item presented Yes No _____ Buckskin Workbook Yes No _____
Reviewer's Initials Reviewer's Initials

Chosen FCF Name: _____

Received

Reviewed

**Passed
Buckskin Testing**

**Failed
Buckskin Testing**

Dates: _____

Wilderness Frontiersman Application Amount Paid \$ _____