

# The Academy



**DTC-1**



**DTC-2**



**June 3-6 2025**

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



# Tomahawk Achievement Camps



The Tomahawk Achievement Camps are designed to give Discovery and Adventure Rangers top notch training in camping skills. They will utilize the patrol system and learn to work as a team. There will be an adult advisor for each patrol. This camp will take place at the same time as The Academy. There will be a completely different staff specifically trained for the needs of boys of this age group.

Upon the successful completion of DTC-1, DTC-2 and ATC you will be awarded a special Ceremonial Tomahawk specialty made for the TAC Graduates.

## DTC-1

Designed for Discovery Rangers to teach basic camping and leadership skills.



### Requirements

- Entering 4th grade
- At least 5 nights camping with Outpost

## DTC-2

Designed for Discovery Rangers to teach advanced camping and leadership skills.

### Requirements

- Entering 5th grade
- DTC-1 Graduate

## ATC

Focused on skills necessary to enter FCF along with the rank of Buckskin and will have a Frontiersman Theme.



### Requirements

- Entering 6th grade



## TRAIL TO THE SABER

### SABER OVERVIEW

In order for a boy to earn the Ohio Saber, he must attend and complete Ohio Training Camp, JTC, 3 camps of a specific Trail of his choice and the TASC Camp. His last camp of the 5 must be TASC. He will not be able to mix and match camps - he must complete 1 full trail in order. He can attend other camps as he pleases but will only earn the saber when he has completed JTC, 1 full Trail, as described below, and then TASC Camp.

### ENTRY CAMP INTO THE ACADEMY:

- **JTC (7<sup>th</sup> grade)** – This camp will be based primarily on teaching leadership skills and will be boy-led, adult-facilitated.

### CAMPING TRAIL:

- **Advanced Camp 2025** (Camping, Survival & Trail skills, 8<sup>th</sup> grade) – This camp will feature basic camping skills combined with Trail skills including cooking, compass and geocaching.
- **Canoe (2026) Canoe Camp**, 9<sup>th</sup> grade) – This camp will emphasize canoeing, kayak, sail boating and proper water safety.
- **High Adventure** (Survival Camp, 10<sup>th</sup> grade) – This camp will emphasize boy led adult facilitated high action and energy tasks

### HIGH TECH TRAIL:

- **HTC (2027)** (Computer skills) – This camp includes introduction into the 3 basic areas of computer technology which include, hardware, networking and applications.
- **HTC (2025)** (Media skills) – This camp includes the visual medium of motion pictures which include film production, camera work and editing.
- **HTC (2026)** (Robotics) – Robotic camp.

### ACADEMY EXIT CAMP:

- **Service (TASC)** – (11<sup>th</sup> grade) TASC – The Academy Service Camp Designed to encourage servant leadership through personal growth. Learning real life skills to make a difference in your community and most importantly your church. Skills will include Altar Working, Search and Rescue, First Aid and CPR, and Security. This camp is held in June leading up to Pow-wow
- **We need 5 boys to hold this camp.**

**This Camp will not be offered in 2025**

# **IMPORTANT STUFF -- PLEASE READ!**

The academy registration at camp is the 3<sup>th</sup> of June at 9:00 AM. Closing ceremony is June 6<sup>th</sup> at 9:00 AM

**Attention: JTC and High Adventure Camps** There is an additional permission slip needed for JTC and High Adventure Camp. (It's in the packet) Please sign these and include with your son's regular Permission Slip. High Adventure needs to fill out the Black powder and Knife permission slip also.

**(NEW)** If your son completed JTC in 2023 he will advance to Canoe in 2024. **They will attend Advanced camp in 2025.** We offer each of these camps every other year to cut down costs. You'll see the camp offered on the registration page.

The equipment lists will be online at [www.ohiorangers.org](http://www.ohiorangers.org) We will **NOT** mail a card after registration. If you need to know, email or text me. The lists will be available by 3-1-24. Any questions: Text, call, or email: [ohiogmaa@yahoo.com](mailto:ohiogmaa@yahoo.com)  
Billy Powell 216-346-4159

Cell phones will be collected by the leaders of each camp and returned at the conclusion of camp. It has become a major problem with boys calling and texting after hours.

Please have your Senior Commander sign registration form or a Pastor's signature if over 18. Leaving the responsibility of a background check in the hands of the local church over age 18.

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

**The Academy is June (3-6) this year at Heartland**

# PARENT PERMISSION & RELEASE FORM

I hereby authorize my son, \_\_\_\_\_ (trainee), to attend the Ohio Royal Rangers Leadership Training Academy (the camp). I understand the arrangements and feel that adequate precautions for the safety of the trainee have been taken. I understand that though the camp is primarily based out of the Heartland Conference Retreat Center located in Marengo, Ohio, that for training purposes, it may be necessary to transport the trainee off of the camp premises and I consent to said transportation.

By signing this Release, I do for myself and the above-named trainee, release, hold harmless and indemnify The Ohio Royal Rangers through the Ohio Ministries Network Inc. of the Assemblies of God, its members, officers, directors, agents, volunteers, and employees (OMN) from any and all liability for all losses, damages and personal injuries to the above-named trainee resulting from any actions or inaction, or other cause whatsoever in connection with the above-referenced activity whether related to the emergency medical treatment referenced above or whether related to any other matter related directly or indirectly to the scheduled activity and any transportation in connection with such activity. By signing this Release, I specifically and additionally intend to release OMN from liability for all losses, damages and personal injuries to the trainee. I understand that OMN will not bear liability for the consequences of the trainee's negligence or oversight.

I have read and understand the preceding paragraph, and voluntarily sign this Release on my behalf and on behalf of the trainee.

Release of Liability: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Parent or Legal Guardian

I agree that I am the guardian of the above mentioned trainee, and have read and agreed with all the above terms and conditions of this release form

Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Parent or Legal Guardian

## **Photo and Media Permission**

I, by signing this release, do allow for my child's picture to be used by Official OMN Websites, Official OMN Publications and other Official OMN Media Productions. I understand that OMN, its members, officers, directors, agents, volunteers, and employees will not be held liable for any misuse.

I have read and understand the preceding paragraph, and voluntarily sign this Release on my behalf and on behalf of the above-named trainee.

Photo Permission: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Parent or Legal Guardian

I agree to reading and understanding this permission and liability release form and attest that I am the official guardian of this trainee.

**NO NEED TO FILL THIS OUT IF REGISTERING ONLINE**

**Ohio District Royal Rangers - Junior Leadership Training Academy**

**Medical Authorization and Health Information Form**

Current health and medical summary with Authorization and Release to Treat  
 To be filled out by parent or legal guardian of trainee - attach separate page if necessary.  
 Please print in ink.



**Trainee Information:**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 \_\_\_\_\_ (Last) \_\_\_\_\_ (First) Mo Day Year  
 Address \_\_\_\_\_  
 City & State \_\_\_\_\_ Zip \_\_\_\_\_

**Parent / Guardian Information:**

Trainee is under custodial care of:  
 Both parents \_\_\_\_\_ Guardian(s) \_\_\_\_\_  
 Mother only \_\_\_\_\_ Father only \_\_\_\_\_  
 Parent/Guardian Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_ (day)  
 \_\_\_\_\_ (evening)

**Medical History (Attach additional pages if necessary):**

Date of most recent physical exam: \_\_\_\_\_  
 Are you aware of any current health problems? Yes / No  
 Now under medical care or taking medication? Yes / No  
 In the last 6 months, have any of these happened:  
 Any surgery, illness, allergy or other change? Yes / No  
 Hospitalizations or serious injuries? Yes / No  
 Give dates and full details for any "yes" answers here:  
 \_\_\_\_\_  
 \_\_\_\_\_

**Current Medications** \_\_\_\_\_

Being taken for (condition) \_\_\_\_\_  
 Dosage and frequency \_\_\_\_\_

**Chronic or Recurring Conditions** (check all that apply)

- Asthma  Heart disease / defect
- Bleeding Disorders  Urinary Infection
- Convulsions / Seizures  Vision – Contacts / Glasses
- Diabetes  Teeth – dentures / bridge
- Ear Infection  MRSA/Staph Infection
- Emotional / behavior disorder  Fainting
- Hypertension  Other

Please provide details for any items checked (attach additional page if necessary).  
 \_\_\_\_\_  
 \_\_\_\_\_

**Special Needs (Attach additional page if necessary):**

Dietary \_\_\_\_\_  
 \_\_\_\_\_  
 Activities to be restricted \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

This Health History is complete and accurate. My son (trainee) has permission to engage in all prescribed activities except as noted above.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (Parent / Legal Guardian)

**Medical Authorization:**

I give permission for full participation in the Ohio District JLTA. In the event that I & the other Emergency Contacts listed below cannot be contacted, I hereby give my permission to the licensed health-care practitioner selected by the leadership in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child (This is to serve as a waiver of HIPAA).

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
 (Parent / Legal Guardian)

**Emergency Contact Information:**

In addition to the above parent(s)/guardian(s), this trainee may be released to the following person(s):

**Name:** \_\_\_\_\_  
 Relationship: \_\_\_\_\_ Phone \_\_\_\_\_  
**Name:** \_\_\_\_\_  
 Relationship: \_\_\_\_\_ Phone \_\_\_\_\_

**Physician:**

Name: \_\_\_\_\_ Phone \_\_\_\_\_  
 Insurance Carrier \_\_\_\_\_  
 Policy # \_\_\_\_\_ Phone \_\_\_\_\_  
 Insured name (parent) \_\_\_\_\_

**Dentist:**

Name: \_\_\_\_\_ Phone \_\_\_\_\_  
 Insurance Carrier \_\_\_\_\_  
 Policy # \_\_\_\_\_ Phone \_\_\_\_\_  
 Insured name (parent) \_\_\_\_\_

**Allergies:** (check all that apply)

- Animals  Plants
- Food(s)  Pollen
- Hay Fever  Other
- Insect Stings
- Medicine/drugs

Please provide details of any checked (Attach separate page if necessary):  
 \_\_\_\_\_  
 \_\_\_\_\_

**Immunizations:** (year)

- Tetanus \_\_\_\_\_
- Measles \_\_\_\_\_
- Rubella \_\_\_\_\_
- Mumps \_\_\_\_\_
- Diphtheria \_\_\_\_\_
- Pertussis \_\_\_\_\_
- Hepatitis B \_\_\_\_\_
- TB Test \_\_\_\_\_
- Other \_\_\_\_\_

**Medical Authorization:**

I give permission for the First Aid Staff to administer to the trainee, according to instructions printed on the original container, the following over-the-counter and/or prescription medications which I have provided in their original containers. Check all that apply:

- Acetaminophen (Tylenol)  Ibuprofen (Motrin)
- Antacid (Mylanta, Tums)  Oral anesthetic
- Hydrocortisone cream  Antihistamine (Benadryl)
- Cough suppressant (Robitussin)  Eye wash
- Antibiotic cream (Neosporin)  Sunscreen
- Calamine lotion  Insect repellent
- Other \_\_\_\_\_

Prescription medications (attach separate page if necessary): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (Parent / Legal Guardian)

Name \_\_\_\_\_  
 Date \_\_\_\_\_  
 Camp \_\_\_\_\_



**THE LINK FOR ONLINE REGISTRATION IS BELOW: (PREFERED)**

**June 3-6, 2025**

<b>TAC</b>			<b>Camping</b>			<b>High Tech</b>		
Desired Camp		Completed Camp year	Desired Camp		Completed Camp year	Desired Camp		Completed Camp year
<input type="checkbox"/>	DTC 1		<input type="checkbox"/>	JTC		<input type="checkbox"/>	JTC	
<input type="checkbox"/>	DTC 2		<b>2025</b>	Advanced Camp	<b>2025</b>	<input type="checkbox"/>	HTC Computer Skills	
<input type="checkbox"/>	Adventure		<b>2026</b>	Canoe 2026	<b>2026</b>	<input type="checkbox"/>	<b>HTC Media Skills</b>	
			<input type="checkbox"/>	High Adventure		<input type="checkbox"/>	HTC Robotics	
			<input type="checkbox"/>	TASC		<input type="checkbox"/>	TASC	

This is the Link for online registration, please use it, this page can be a worksheet,  
<https://www.shelbygiving.com/App/Form/65ef740f-e95c-4b2e-a982-0a0086503f17>

	Must be postmarked on or before this date	Camp cost with charter discounts (15%)	Camp cost before charter discount
<b>Early Discount Rate</b>	May 15, 2025	\$160.00 for all camps \$75.00 with application	\$170.00 for all camps \$75.00 with application
<b>Event Rate</b>	May 15, 2025	\$185.00 for all camps (\$75.00 with application)	\$215.00 for all camps (\$75.00 with application)
<b>Onsite Rate (Walk-on)</b>	Walk-on must be approved before entry via phone, email, text	\$215.00 for all camps	\$240.00 for all camps

Will you be receiving your Saber or Tomahawk in 2025?  Yes  No If yes, a graduation application **MUST** be submitted with this application.

T-Shirt Size: Adult: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ 2XL \_\_\_ 3XL \_\_\_

Boys: XS \_\_\_ S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_

Name: \_\_\_\_\_

Grade (Fall 2025): \_\_\_\_\_ Age: \_\_\_\_\_

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

City/St/Zip: \_\_\_\_\_

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

Email: \_\_\_\_\_

Amount being sent and Check #: \_\_\_\_\_

Section: \_\_\_\_\_ OP#: \_\_\_\_\_

The above listed applicant meets all of the requirements necessary to attend the above registered camp. In addition, if the trainee is eighteen (18) years of age or older, a children's worker's application has been completed and a proper background check has been completed within the last twelve (12) months through the local church on the above trainee. I understand that the failure to have these requirements met when attending camp will result in dismissal from the camp. These requirements are necessary to ensure the most effective training experience

Sr. Commander's Signature: \_\_\_\_\_ (must) Phone # \_\_\_\_\_ Date \_\_\_\_\_

Mail Completed Forms and a check made out to "Ohio Royal Rangers" to: (note: new address) Billy Powell 711 East 2<sup>nd</sup> Street, Port Clinton, OH 43452 (Any questions call or text 216-346-4159 or email: ohiomaa@yahoo.com)

# Boys Training Academy/TAC Uniforms

Due to the National Royal Ranger Office changes to the Royal Ranger Uniform NO KHAKE UNIFORM WILL BE REQUIRED for the 2025 Academy (Men & Boys) and TAC.

Note: Uniform Change for Graduates: Utility not Khaki!

- **All Academy Graduates will wear the Utility Uniform in this manner:**
  - **Both patches and pins are worn.**
  - **Shirt must be worn tucked in.**
  - **Sleeves must be worn down (i.e. not rolled up)**
  - **Bolo tie is required (wearer's choice as to style)**
- **FCF membership may be represented by either a patch or a pin worn above the right pocket, at the user's discretion.**

TAC Graduate uniforms for the Court of honor will be jeans and a shirt will be issued at the camp.

All Academy, Boys and TAC Trainees will be given one camp t-shirt and more will be available for sale prior to the camp. All TAC Trainees (DTC1, DTC2 & ATC) will wear jeans as their "uniform" pants. All Academy Trainees wear jeans or BDUs from previous years or camps. Please refer to the actual camp equipment checklists for the specific requirements for each camp.

## Registration Instructions

Please complete the following forms for each boy:

- 2025 Ohio JLTA Registration Form
- Parent Permission and Release Form
- High Ropes, Zip line, Challenge Course release forms. (JTC, High Adventure)
- Black powder release form for High Adventure
- Medical Authorization Form
- Graduate Form if you are Graduating this Year from TAC or The Academy.

Mail Them To:

Billy Powell  
711 East 2<sup>nd</sup> St  
Port Clinton, OH 43452

When you mail in the proper paperwork and deposit, you can find the equipment list for your son's camp on the Network website, please don't wait until the last minute to access this list. The list will be available by 3-1-25

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

Questions? Email: [ohiogmaa@yahoo.com](mailto:ohiogmaa@yahoo.com) Text or Call: 216-346-4159

# Graduation Form

**Must be submitted with your Boys Academy/TAC Application to Dan Holloway.**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Outpost # \_\_\_\_\_ Church \_\_\_\_\_ Section \_\_\_\_\_

Position in OP \_\_\_\_\_ Other Church Involvement \_\_\_\_\_

**Please list which camps you have attended. If you have completed a camp in a District other than Ohio, you must also submit a transfer application also located in this packet. *Does not apply to TAC***

Trail/Camp	Year Completed
<b>Camping</b>	
Training Camp	
Advanced Camp	
Water Sports (Canoe)	
High Adventure	
TASC	
<b>High Tech</b>	
Training Camp	
HTC Computer Skills	
HTC Media Skills	
HTC Robotics	
TASC	
<b>TAC</b>	
DTC1	
DTC2	
ATC	

## Saber/TAC Information

This information should be printed very carefully so that it may be read.

Please write information **EXACTLY** as you want it to be engraved on your saber/tomahawk (please print clearly).

Name \_\_\_\_\_

Scripture Reference (Ex- Isaiah 40:31) \_\_\_\_\_ *Does not apply to TAC*

Mail with your Academy registration to:

Billy Powell, 711 East 2<sup>nd</sup> St Port Clinton, OH

(Any questions call or text 216-346-4159 or email Billy Powell – ohiohmaa@yahoo.com)

# Ohio Academy Transfer Application

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

OP# \_\_\_\_\_ Church \_\_\_\_\_ Section \_\_\_\_\_

In order to transfer an Academy camp from another District to the Ohio Network you must submit a \$20 per camp transfer fee along with a copy of the certificate from the camp attended AND a letter from either the Camp Director or the District Director in the District in which the camp was attended.

**ACCEPTANCE OF CAMP TRANSFER WILL BE CONSIDERED ON A CASE BY CASE BASIS AND IS SUBJECT TO APPROVAL OF THE OHIO NETWORK ROYAL RANGERS BEFORE CREDIT WILL BE GIVEN –**

Camp Completed in other district:

- JTC
- AJTC
- JSC
- JCE

District Completed in: \_\_\_\_\_

Dates of Camp: \_\_\_\_\_

Location of Camp: \_\_\_\_\_

Camp Director: \_\_\_\_\_

Submit this application, a copy of certificate of completion along with \$20 per transferred camp to:

Billy Powell 711 East 2<sup>nd</sup> St, Port Clinton, OH 4159  
(Any questions call or text 216-346-4159 or email Billy Powell.. [ohiogmaa@yahoo.com](mailto:ohiogmaa@yahoo.com))  
Have the Camp Director or District Director mail a letter verifying camp attendance



# HEARTLAND

## DRIVING DIRECTIONS

3201 COUNTY RD 225, MARENGO , OH 43334

### FROM I - 71

Take Exit 140, and go south on State Route 61

Turn right (west) on County Road 15 also called West Liberty Mt Vernon Road

Note: County Road 15 will go back over I-71

Turn right (north) on County Road 218 also called Berkshire-South Woodbury Road

Turn left (west) on County Road 225 also called West Liberty East Road

The entrance to Heartland is on the right!



### FROM ROUTE 23

Turn east on State Route 229

Note: Continue through the town of Ashley

Turn right (south) on County Road 218 also called Berkshire-South Woodbury Road

Note: you will come to a sharp left curve.

After the curve, Turn right to stay on Country Road 218

Turn right (west) on County Road 225 also called West Liberty East Road

The entrance to Heartland is on the right!

