Mississippi District Royal Rangers

2026 Powwow Registration Form

(If you are registering online at rangertrails.com, completion of this form is not necessary.)

* This form must be submitted to the Pow-Wow Coordinator by **Wednesday, May 27, 2026**!

$68.00 **$75.00**	Chartered Registration Non-Chartered Registration	**Covers**: Patch, offering for guest speaker, trophies, awards, insurance, campground fees, Friday evening meal, and other expenses.
$21 - $24	Powwow T-shirt	Available **PRIOR** to Powwow **ONLY** through pre-registration. Only a few extra T-shirts will be available at Powwow to purchase separately.
$40.00	Meal Plan **(4 Meals)**	**Optiona**l: meals will be available in the cafetorium for Outposts staying in the cabins and those not wanting to cook in their campsites. **NO** cooking will be allowed in the cabins.
$50.00	Cabin bed rental	**For Friday and Saturday nights.** Cabin beds will be available on a first-come, first-serve basis. More than 1 Outpost may be in a cabin.

Outpost Number: _____ Do you already have an established campsite? Yes ☐ No ☐

Church: _____ Pastor: _____

Address: _____ Church Phone: _____

City/State/Zip: _____ Up-to-date Charter? Yes ☐ No ☐

Commander in Charge: _____ e-mail: _____

Address: _____ Phone: _____

Boy T-shirts:	**Adult T-shirts:**	**Adult T-shirts:**
Y-SM x _____ Y-MED x _____	**SM x _____ MED x _____**	**2XL x _____ 3XL x _____**
Y-LG x _____	**LG x _____ XL x _____**	**4XL x _____**
Total X $21.00 _____	**Total X $21.00 _____**	**Total X $24.00 _____**

Total number you are registering (Chartered) ....._____ **x $68.00** = _____

Total number you are registering (Non-Chartered) ....._____ **x $75.00** = _____

Total number of T-shirts (Y-SM – A-XL) ..... _____ **x $21.00** = _____

Total number of T-shirts (A-XXL – A-XXXXL) ..... _____ **x $24.00 =** _____

Total number of Meal Plans (4 meals) Total # of Boys ..... _____ **x $40.00 =** _____

Total # of Leaders .. _____ **x $40.00 =** _____

Total number of cabin beds needed ..... _____ **x $50.00 =** _____

Total number of Day Guests ..... _____ **x $10.00 =** _____

Grand Total amount enclosed: _____

* I acknowledge that the bathroom and shower facilities in the cabins are reserved only for use by campers who are staying in the cabins. Commander in Charge signature: _____

Mail this form to: **Kenny Richardson 121 Allen Avenue Stonewall, MS 39363**

If you have any questions, please call: **Home: 601-659-4453 | Cell: 601-934-2123**