

NEW JERSEY CONFERENCE

ADVENTURER CLUB

DOCUMENTS

FOR DIRECTORS
& STAFF





NEW JERSEY CONFERENCE OF SDAs
ADVENTURER DIRECTOR

Adventurer Ministries Mission:

To provide a church-centered, parent-child relationship strengthening, recreational-spiritual program that develops children, both boys and girls ages 6-9 (1-5 for Discovery Club), spiritually, physically, and socially.

**Adventurer Director should not be a Pathfinder 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

Candidates should demonstrate at least one of the following passions:

Children's Ministry

Parenting

Children's Community Outreach

Candidate should possess the following qualities:

I. Love Jesus

II. Love young people (ages 6-9, and 1-5 for Discovery Club)

III. Possess leadership skills

A. Plan yearly Adventurer calendar

B. Organize local Adventurer meeting and events which include but not limited to -

Induction Service

Investiture Service

Outdoor Family Activities

Adventurer Sabbath

Family Networking

Outreach activities

C. Ability to plan and manage a board approved budget

D. Organize and lead Adventurer staff and parent meetings

E. Recruit and supervise Adventurer volunteer support staff (class instructors, craft instructors, counselors)

F. Delegate responsibilities among staff members

G. Participate of all NJCYOUTH Adventurer activities and events

IV. Communication skills

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

Ability to communicate with parents

Ability to communicate with Adventurer aged children

Maintain a liaison relationship with Conference Youth Ministries and local church

Candidate must have clean record/background (must complete Verified Volunteers Background Check):

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



NEW JERSEY CONFERENCE OF SDAs

STAFF AND STATE COORDINATOR



YOUTH DIRECTOR
Eliasib Fajardo
efajardo@njcsda.org
(202) 652-6279



ASSISTANT YOUTH DIRECTOR
Anthony Baffi
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YOUTH ADMIN. ASSIST.
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COORDINATORS

This year we have a State Coordinator and assistants that will help cover the needs locally. We will soon post the information of the new State Coordinator, meanwhile you can contact the NJCYOUTH Office (youth@njcsda.org).

FORMS TO BE KEPT IN THE CLUB FILES



ADVENTURER MEMBERSHIP APPLICATION 2022

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 1 years old for the Discovery Club or be 6 years old for the Adventurer Club
- Faithfully attend scheduled club activities with a parent
- Agree to follow the guidelines set forth by the local club including paying fees
- Follow the Adventurer Pledge (*Because Jesus loves me, I will always do my best.*)
- Follow the Adventurer Law (*Be obedient. Be pure. Be true. Be kind. Be respectful. Be attentive. Be helpful. Be cheerful. Be thoughtful. Be reverent.*)

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	



ADVENTURER 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
Health History	Reason for Administering <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 Adventurer 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 SDAs social media and web sites. I will assist the applicant in observing the rules of the Adventurer organization and will encourage him/her to take part in all club activities. I agree to pay the fee required for Adventurer membership with the conference. Permission for photo copying this information and health record is granted for use by the Adventurer 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 http://www.ncsrisk.org/adventist/ 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.

Name:			
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?			

Emergency Contact 1

Name		Phone 2	
Phone		Relationship	

Emergency Contact 2

Name		Phone 2	
Phone		Relationship	



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
VOLUNTEER PAPERWORK CHECKLIST

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

Name	Volunteer Staff Application	Volunteer Staff Medical Information	Background Check	Car Insurance	Driver's License	Signed Guidelines for Volunteers	Other:

CLUB REGISTRATION IS ONLY AVAILABLE ONLINE

CONNECT TO

www.njcyouth.com/adventurers

INCLUDED IN THE \$10 REGISTRATION

ADVENTURER

1. Yearly Club Membership
2. [12 Months Insurance](#)
3. [Activities Book](#)
4. [Record Card](#)
5. Class Pin (if invested)
6. 1 Adventurer Club Sticker
7. [The baptismal pin \(if baptized\)](#)

STAFF & VOLUNTEER

1. Yearly Club Membership
2. [12 Month Insurance](#)
3. 1 Adventurer Club Sticker

DIRECTOR

1. Yearly Club Membership
2. [12 Month Insurance](#)
3. 1 Adventurer Club Sticker
4. [Adventurer Club Starter kit](#) for clubs that register 15 or more Staff/Parent/Volunteer (Including Director).

PARENT

1. Yearly Club Membership
2. [12 Month Insurance](#)
3. Parent Pin
4. 1 Adventurer Club Sticker

ADVENTURER YEARLY PLANNING FORM

Club:			Year:			
Mission, Vision, Goals, and Theme						
	Meeting Dates	Honors to Teach	Activities/Nature	Outreach	Other	Budget
January						
February						
March						
April						
May						

June					
July					
August					
September					
October					
November					
December					

NEW JERSEY CONFERENCE OF SDAs
ADVENTURER CLUB INSPECTION

Church Name: _____ Club Name: _____

Directors Name: _____ Inspection Date: _____

Number of total members: _____ Total members present: _____

ote: This inspection MUST be done by an NJC Coordinator or a Master Guide appointed by the State Coordinator.

Inspector Signature: _____

Club Program	Good	N/A	Improve
Starts On Time			
Adventurer Pledge & Law			
Pledge of Allegiance			
Pledge to Christian & Bible Flag			
Adventurer Song			
Opening Prayer			
Devotional			
Directors Opening Remarks			
Staff is ON TIME			
Program Variety			
Closing Remarks			
Class C Uniform Present on Everyone (Club Shirts)			
Teachers are prepared			
Each class is in ratio			
Restroom Supervision			
Classes are visual			
Meeting areas are clean			

Notes:

First Aid Kit	Good	N/A	Improve
Kit is visible always in safe area			
Products are up to date (not expired)			
Kit has enough supplies for club size			

Notes:

Club Administration	Good	N/A	Improve
Verified Volunteers Complete			
Adventurer Club Applications			
Guidelines for Volunteers Signed			
Staff Volunteer Applications			
Volunteer Paperwork Checklist			
Health/Medical Forms			
Photo Consent Forms			

Notes:

Club Equipment	Good	N/A	Improve
Club Banner			
American Flag			
Adventure Flag			
Fire Extinguisher			
Instructors have their booklets/manuals			
Christian Flag			

Flags & banners should be properly placed.

Notes:

Discipline	Good	N/A	Improve
Manners & Conduct are courteous			
Staff have control of their students			
Children are treated equally/respectfully			
Orderliness during club time			
Staff are respectful of each other			

Director & Staff should be respectful & courteous to inspector & Vice versa

Notes:

NEW JERSEY CONFERENCE OF SDAs
ADVENTURER INVESTITURE FORM

Church Name: _____ Club Name: _____

Directors Name: _____ Inspection Date: _____

ote: This inspection MUST be done by an NJC Coordinator or a Master Guide appointed by the State Coordinator.

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
Women/Girls blue stockings			
Adventure Blue Uniform Shirts			
Women/Girls Navy Blue Skirts			
Staff/Boys Navy Blue Pants			
Black Belts (men/boys)			
Sashes			
Club Scarf & Slides			
Boys/Girls Plain Black Shoes			
Patches Properly Placed & Sewn			
Uniform is ironed & well presented			
Staff/Boys Navy Blue Socks			
Staff All Black Shoes			
Directors Cord and Stars			
Navy Blue Ties Men/Boys			
Navy Blue Ties Women/Girls			
Hair well-kept/No color nail polish/No jewelry			

Entire Club MUST have complete uniform.

Notes:

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

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			
Law Explanation presented by CHILDREN			
Organization			
Director/Staff are prepared			
Entire Club is in FULL Uniform			
Discipline & Ordinance from Staff and Adventures			

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
ADVENTURER SABBATH FORM

Church Name: _____ **Club Name:** _____

Directors Name: _____ **Inspection Date:** _____

ote: This inspection MUST be done by an NJC Coordinator or a Master Guide appointed by the State Coordinator.

Inspector Signature: _____

Uniform	Good	OK	Improve
Woman navy blue stockings			
Adventure Blue Uniform Shirts			
Staff/Girls Navy Blue Skirts			
Staff/Boys Navy Blue Pants			
Black Belts (men/boys)			
Sashes			
Club Scarf & Slides			
Boys/Girls Plain Black Shoes			
Patches Properly Placed & Sewn			
Girls Navy Blue Stockings			
Staff/Boys Navy Blue Socks			
Staff All Black Shoes			
Hair well-kept/No color nail polish/No jewelry			
Uniform is ironed and well presented			
Directors Cord and Stars			
Navy Blue Ties for Men/Boys			
Navy Blue Ties for Women/Girls			

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)			
Adventurers are participating throughout the program			
Adventurer or Adventurers preaching			

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

Notes:

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

Everything should be placed in the correct order.

Notes:

NEW JERSEY CONFERENCE OF SDAs
ADVENTURER INDUCTION FORM

Church Name: _____ Club Name: _____

Directors Name: _____ Inspection Date: _____

ote: This inspection MUST be done by an NJC Coordinator or a Master Guide appointed by the State Coordinator.

Inspector Signature: _____

Uniform	Good	N/A	Improve
Woman blue stockings			
Adventure Blue Uniform Shirts			
Staff/Girls Navy Blue Skirts			
Staff/Boys Navy Blue Pants			
Black Belts (men/boys)			
Sashes			
Club Scarf & Slides			
Boys/Girls Plain Black Shoes			
Patches Properly Placed			
Girls Navy Blue Stockings			
Staff/Boys Navy Blue Socks			
Staff All Black Shoes			
Hair well-kept/No color nail polish/No jewelry			
Uniform is ironed and well presented			
Directors Cord and Stars			
Navy Blue Ties for Men/Boys			
Ties for women/girls			

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
Law Explanation by Adventurers			
Explanation of Classes by Teachers/Instructors			
Altar			
Altar Explanation			
Scarf Placement			
Parent/Adventurer Commitment			

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			
Adventurer Pledge			
Adventurer Law			
Opening Prayer			
Adventurer Song			
Devotional is child 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
ADVENTURER BIBLE GAME 2022



Matthew 1 - 28

The Adventurer Bible Game is the Official North American Division Adventurer Bible learning program. The program is created to challenge older adventurers to use their reading skills and their amazing ability to memorize the Bible.

It is intended to be a family-based activity with parents and Adventurers studying and playing together. Each year new passages of scripture are assigned (alternating Old Testament and New Testament) and excited Adventurers and their parents/caregivers commit themselves to study those passages of God's Word.

The Adventurers are tested over the assigned passages. Because this Bible activity has a different focus than Pathfinder Bible Experience, a 6-year rotation of Bible content has been created that will help introduce Adventurers to the major stories and themes of the Bible.

Location

It will be hosted during the Adventuree (July 13-15, 2022).

Adventurer Bible Game Instructions

With this document, your club and conference will be able to understand how the Adventurer Bible Game works and what are the expected practices and outcomes. Contact the NJCYouth Office or the State Adventurer Coordinator for more details regarding ABG..

Download the passages of the Bible here:

English - [Download PDF files here](#)

Spanish - [Descarga el archivo PDF en español](#)

French - [Téléchargez tous les PDF](#)

**DOWNLOAD
INSTRUCTIONS**



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