

FUNDING TH





GETTING INVOLVED

Thank you for volunteering as an Adult Scouter! Without you, this program could not exist.

We need volunteers to help with: Den Meetings (Den Leaders) Pack Meetings (Assistant Cubmasters) Activity Planning (Committee Members)

Even if you do not take on a yearround volunteer role, we need each family to help with some part of our program and events.

JOIN ONLINE

Many Cub Scout Packs allow for online registrations. If you or your friends are interested in joining, share this link or direct them to <u>www.BeAScout.org</u>.

Just for signing up, you'll receive a FREE model rocket to start your Scouting Adventure!



THE ADULT APPLICATION

Please fill out your application. The pack will sign off and our council will complete a criminal background check before your application is approved. You must also complete Youth Protection Training (available at My.Scouting.org).

ADULT APPLICATION 524-501	This form is read by machine. Plea UNIT ADULTS (Fill in the circle	ase print the numbers and letters as s .)	shown: 1 2 3 4 5 Council/district position code		O A B C D E F G H I All guestions must be answered. Write NONE If applicable.
The information obtained in this form is for the Pack internal use of the BSA only.	Troop Team Crew	Ship Unit OR	District name		1. Scouting background. Position Council Year
EXPIRE DATE / /	TERM MONTHS New lead				2. Experience working with youth in other organizations. Please provide contact information.
TRANSFER FROM: COUNCIL NO.	y be accomplished at no charge by transferring TYPE OF UNIT	g the registration. Mark and attach a copy of the UNIT NO.	certificate.		3. Previous residences (for last five years). City State
Please print one letter in each space—press hard; you are making three	ee copies.				4. Current memberships (religious, community,
First name (No initials or nicknames)	Middle name	Last name		Suffix	 business, labor, or professional organizations).
					 References. Please list those who are familiar with your character. References may be checked.
Country Mailing address	City		State Zip code	6	Name
US					flame Telephone ()
Home phone Business	phone	Ext. Cell phone			Telephone ()
		x	7		6. Additional information. Yes No (Mark each answer.)
Date of birth (mm/dd/yyyy) Ethnic background: Back//Mican American Caucasian/Write	Native American Alaska Native Hisparic/Latino Pacific Islander	Asian Other		State	a. Have you ever been removed from OO or asked to leave a leadership position in an organization due to allegations regarding your personal conduct or behavior? Explain:
Gender Social Security No. (required)	Occupation	Employer			
○ M ○ F					b. Do you use illegal drugs or abuse
Country Business address	City		State Zip code		
					c. Have you ever been arrested for a
Position Code Scouting position (description)		Are you an Eagle Scout? Date earned (mm/dd/yyyy)			criminal offense (other than mindr traffic violations)? Explain:
		🔿 Yes 🔷 No	1 1		
E-mail address Work (Select one) Home	@			<i>loys' Life</i> ubscription	d. Has your driver's license ever been OO suspended or revoked? Explain:
I understand that: 1. By submitting this application 1 am authorizing the Boy Scouts of America to obtain a background three applications and the application of the application and abide by of the Boy Scouts of America two NM/Scouting cays. 2. Lagree to complete Nuff Protection training within 30 days of this application and abide by of the Boy Scouts of America two NM/Scouting cays. 2. Lagree to complete Nuff Protection training within 30 days of this application and abide by of the Boy Scouts of America two NM/Scouting cays.	wered "Yes" nal qualities of an Date made by the	e. Have you ever been investigated for, OO accused of, or charged with abuse or neglect of a minor child? Explain:			
 I hereby release and agree to hold harmless from liability any person or organization; local and the Boy Scouls of America and its officers, directors, employees, and volunteers for any connection with my participation. 	council; chartered organization; INITIALS an	it leader approving the application. Neither I nor the religiou y information indicating that the applicant does not possess the Boy Scouts of America.	s or organizational leader of our organiza the moral, educational, and emotional qu	ion is aware of alities of an adult	f. Are you aware of any reason not listed above that may call
4. I have read and after that I accept the Declaration of Religious Phrapite and qualifications for with the values and regulations of the Bog Social of America and the local council. I affers that the the second council to the desconting socializes and cells.	he information in this application is REQUIRED AS	pature of chartered organization head or representative PPROVAL FOR COUNCIL AND DISTRICT ADULTS: I have review ccessary to be satisfied that the applicant possesses the mor by Scouts of America.	ved this application and have made any fi ral, educational, and emotional qualities o	Date Now-up inquiries f an adult in the	into question your suitability to supervise, guide, care for, and lead young people?
signature or applicant	Date	gnature of Scout executive or designee		Date	
4001 Registration fee \$	Boys' Life fee \$				LOCAL COUNCIL COPY Retain on file for three years.

THE YOUTH APPLICATION

Welcome to Cub Scouts! To join, please make sure to fill in all the highlighted fields on the below example application (all fields are preferred):

	This form is read by man	chine. Please print	the numbers and lette	rs as shown on the sa	ample application.		
YOUTH	Unit type: (Fill in the circle.) Cub Scout Pack	Boy Scout Troop	Varsity Scout Team		Sea Scout Lone Cub Sc Ship Lone Boy Sc	Linit No ·	
MEMBERSHIP	For pack registration select one:	 Tiger 	Cub Scout	 Webelos Scout 	Arrow of Light ear		
	 Mark here if new to Scouting. 	Former Scout	Former Venturer	Former Sea Scout	O Allow of Light ear	neu	
If applicant has an unexpir	red membership certificate, registration ma	y be accomplished at r	no charge by transferring t	he registration. Mark and	attach a copy of the certificate.		
O Transfer application	Transfer from council number:	Unit typ	e: Pack	Troop Team	Crew Ship	Unit No.:	
	ation (Please print one letter in each space						
First name (No initials or n	nicknames)	Middle na	me	Last name		Suffix	
Country Mailing address			City			State Zip code	
US							
Home phone	Date of birth (n	nm/dd/yyyy)	Grade	Ethnic back	kground:		
	- /	1		O Black/Af	irican American 🔵 Native American	🔿 Alaska Native 💦 🔿	Asian 👌
				Caucasia	an/White O Hispanic/Latino	O Pacific Islander	Other 3
School				Gender:	Male Female	Boys' Life	
				dender.	O Halo	subscription	L CC
Parent/quardian informatio	m Mark here if address is sa	ame as above				subscription	
Parent/guardian information	vn Mark here if address is sa idult partner is not living at the same addre	SCOLORIS COSCUPERIOS CONTRACTOR CONTRACTOR	h an adult application.		here if you are the Tiger adult par	subscription	Asian Other Dther
		SCOLORIS COSCUPERIOS CONTRACTOR CONTRACTOR	h an adult application. Grandparei	O Mark		subscription	
O Mark here if the Tiger a	dult partner is not living at the same addre	ss; complete and attac	🔘 Grandparer	O Mark	here if you are the Tiger adult par	subscription	
Mark here if the Tiger a Select relationship:	dult partner is not living at the same addre	ss; complete and attac Guardian	🔘 Grandparer	Mark	here if you are the Tiger adult par	tner.	
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Mark here if the Tiger a Select relationship: First name (No initials or r Country Mailing address US Home phone Business phone 	duit partner is not living at the same addre	ss; complete and attac Guardian Middle na m/dd/yyyy) / Previous Scouting	Grandparer me City Occupation	Mark nt Other Last name Last name	here if you are the Tiger adult par r (specify)	e e s and approve the application. I an	nder: