

# 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 year-round 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 [www.BeAScout.org](http://www.BeAScout.org).

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](http://My.Scouting.org)).

**ADULT APPLICATION** 524-501 This form is read by machine. Please print the numbers and letters as shown: **1 2 3 4 5 6 7 8 9 0 A B C D E F G H I**

The information obtained in this form is for the internal use of the BSA only.

**UNIT ADULTS (Fill in the circle.)** Council/district position code

Pack  Troop  Team  Crew  Ship Unit No. OR District name

EXPIRE DATE: / / TERM MONTHS  Now leader  Former leader  Venturer

If applicant has an unexpired membership certificate, registration may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.

TRANSFER FROM: COUNCIL NO. TYPE OF UNIT UNIT NO.

Please print one letter in each space—press hard; you are making three copies.

First name (No initials or nicknames) Middle name Last name Suffix

Country Mailing address City State Zip code

Home phone Business phone Ext. Cell phone

Date of birth (mm/dd/yyyy) Ethnic background:  Black/African American  Native American  Alaska Native  Asian  Caucasian/White  Hispanic/Latino  Pacific Islander  Other Driver's license No. State

Gender Social Security No. (required) Occupation Employer

Country Business address City State Zip code

Position Code Scouting position (description) Are you an Eagle Scout? Data earned (mm/dd/yyyy)

Yes  No

E-mail address (Select one)  Work  Home @ Boys' Life subscription

I understand that:

- By submitting this application I am authorizing the Boy Scouts of America to obtain a background check using First Advantage 1000 Ardmore Drive, Alpharetta, GA 30005, and understand it will be used in determining my eligibility. I have reviewed and agreed to the terms and conditions regarding this check and your rights with respect to reviewing or obtaining copies of any information provided.
- I agree to complete Youth Protection training within 30 days of this application and abide by the youth protection requirements of the Boy Scouts of America ([www.MyScouting.org](http://www.MyScouting.org)).
- I hereby release and agree to hold harmless from liability any person or organization: local council; chartered organization; and the Boy Scouts of America and its officers, directors, employees, and volunteers for any injury or damage sustained in connection with my participation.
- I have read and affirm that I accept the Declaration of Religious Principle and qualifications for adult participation. I agree to comply with the rules and regulations of the Boy Scouts of America and the local council. I affirm that the information in this application is true and accurate to the best of my knowledge and belief.

INITIALS REQUIRED

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APPROVALS FOR UNIT ADULTS: I have reviewed this application and the responses to any questions answered "Yes" with the applicant or source listed. I believe the applicant possesses the moral, educational, and emotional qualities of an adult in the Boy Scouts of America.

Signature of unit committee chairman Date

I have reviewed this application and the responses to any questions answered "Yes" and the comments made by the unit leader approving the application. Neither I nor the religious or organizational leader of our organization is aware of any information indicating that the applicant does not possess the moral, educational, and emotional qualities of an adult in the Boy Scouts of America.

Signature of chartered organization head or representative Date

APPROVAL FOR COUNCIL AND DISTRICT ADULTS: I have reviewed this application and have made any follow-up inquiries necessary to be satisfied that the applicant possesses the moral, educational, and emotional qualities of an adult in the Boy Scouts of America.

Signature of Scout executive or designee Date

4001 Registration fee \$ Boys' Life fee \$

LOCAL COUNCIL COPY Retain on file for three years.





**JOIN AND  
CHECK OUT**







Red t-shirt with a graphic design.

PROPER BR  
NOTHING BUT  
GOOD TIMES  
SINCE '88

Grey t-shirt with a tiger graphic and the text "TIGER" and "SINCE '88".











