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 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).

ADULT APPLICATION 524-501	This form is read by machine. P	lease print the numbers and letters as shov	vn: 1 2 3 4 5 6 7 8 9	OABCDEFGHI
	UNIT ADULTS (Fill in the cin	cle.) Co	uncil/district position code	All questions must be answered. Write NONE if applicable.
The information obtained in this form is for the internal use of the BSA only.	Troop Team Crew	Ship Unit No.	strict name	Scouting background. Position Council Year
EXPIRE DATE / / /	TERM MONTHS New I			Experience working with youth in other organizations. Please provide contact information.
If applicant has an unexpired membership certificate, registration ma	y be accomplished at no charge by transfer	rring the registration. Mark and attach a copy of the certi	ficate.	
TRANSFER FROM: COUNCIL NO.	TYPE OF UNIT	UNIT NO.		Previous residences (for last five years). City State
Please print one letter in each space—press hard; you are making thr	ee copies.			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	Name
US				lameelephone ()
Home phone Busines	s nhone	Ext. Cell phone		Name Telephone ()
	<u> </u>	x		6. Additional information. (Mark each answer.)
Date of birth (mm/dd/yyyy) Ethnic background:		Driver's license No.	State	a. Have you ever been removed from OO or asked to leave a leadership
Black/African American Caucasian/White	Native American Alaska Native Hispanic/Latino Pacific Islander	Asian Other		position in an organization due to allegations regarding your personal conduct or behavior? Explain:
Gender Social Security No. (required)	Occupation	Employer		
O M O F				b. Do you use illegal drugs or abuse OO
Country Business address	City		State Zip code	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
US				c. Have you ever been arrested for
Position Code Scouting position (description)		Are you an Eagle Scout? Date e	earned (mm/dd/yyyy)	criminal offense (other than minor traffic violations)? Explain:
		○ Yes ○ No	1 1	
E-mail address Work (Select one) Home	@		Boys' Life subscription	d. Has your driver's license ever been osuspended or revoked? Explain:
I understand that: 1. by South of America to obtain a back of the South of America to obtain a back. 1. by South of America to obtain a back of the South of America to obtain a back of the South of America to Advanced to	my eligibility. I have reviewed and rewing or obtaining copies of any with the youth protection requirements.	APPROVALS FOR UNIT ADULTS: I have reviewed this application and with the applicant or source listed. I believe the applicant possesses adult in the Boy Scouts of America. Signature of unit committee chairman	the moral, educational, and emotional qualities of an Date	e. Have you ever been investigated for accused of, or charged with abuse or neglect of a minor child? Explain:
of the Boy Scouts of America (www.MyScouting.org). 3. Thereby release and agree to hold harmless from liability any person or organization; local and the Boy Scouts of America and its officers, directors, employees, and volunteers for an connection with my particulation.	council; chartered organization; injury or damage sustained in REQUIRED	I have reviewed this application and the responses to any questions mill leader approving the application. Neither 1 nor the religious or or any information indicating that the applicant does not possess the m in the Boy Scouts of America.	ganizational leader of our organization is aware of	f. Are you aware of any reason not listed above that may call
 Thave read and affirm that 1 accept the Declaration of Religious Principle and qualifications for with the rules and regulations of the Boy Socials of America and the local council. I affirm that the state correct to the Description of Anniversity and Description. 	adult participation. I agree to comply he information in this application is	Signature of chartered organization head or representative APPROVAL FOR COUNCIL AND DISTRICT ADULTS: I have reviewed this necessary to be satisfied that the applicant possesses the moral, ed boy Soutia of America.	Date s application and have made any follow-up inquiries ucational, and emotional qualities of an adult in the	into question your suitability to supervise, guide, care for, and lead young people?
signature or applicant	uate	Signature of Scout executive or designee	Date	
4001 Registration fee \$.	Boys' Life fee \$	Signature of Skould executive of designee	Date	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):

YOUTH	Unit type: Cub Scout (Fill in the circle.) Pack	Boy Scout Troop	Varsity Scout Team	Venturing Crew	Sea Scout Ship	Lone Cub Scout	Unit No	0.:
MEMBERSHIP	For pack registration select or	ne: Tiger	Cub Scout	Webelos Sco		Lone Boy Scout	r.	
	 Mark here if new to Scouting. 	Former Scot	ut Former Venturer	Former Sea	Scout	 Arrow of Light earned 	IS.	
lf applicant has an unexpi	red membership certificate, registration i	may be accomplished a	at no charge by transferring	the registration. N	1ark and attach a cop	y of the certificate.		
Transfer application	Transfer from council number:	Unit	type: Pack	○ Troop ○	Team Crev	v Ship	Unit No	o.:
	r from unexpired certificate:							
Name and address inform First name (No initials or	ation (Please print one letter in each s	pace—press hard, yo Middle		Last nan	ne			Suffix
TO CHARLES (IV.		madio		Edd Hall				Jana
Country Mailing address			City				State	Zip code
US								
Home phone	Date of birth	n (mm/dd/yyyy)	Grade	Et	hnic background:			
-	- /	1			Black/African America	n Native American	 Alaska Native 	Asian
School					Caucasian/White	Hispanic/Latino	Pacific Islande	er Other
SCHOOL								
				G	ender: Male	Female	R	ove' life
				G	ender: Male	O Female	O B	oys' Life ubscription
Parent/quardian informatio	Mark here if address is	s same as above		G			SI	oys' Life ubscription
	on Mark here if address is adult partner is not living at the same add	STREET,	tach an adult application.	G		Female are the Tiger adult partner	SI	oys' Life ubscription
Mark here if the Tiger		STREET,	tach an adult application. Grandpare				SI	oys' Life ubscription
Mark here if the Tiger a Select relationship:	adult partner <mark>is not living at the same add</mark> Parent	dress; complete and at	Grandpare		Mark here if you a		SI	oys' Life ubscription Suffix
Mark here if the Tiger a Select relationship:	adult partner <mark>is not living at the same add</mark> Parent	dress; complete and at	Grandpare	ent	Mark here if you a		SI	ubscription
Mark here if the Tiger a Select relationship: -irst name (No initials or	adult partner is not living at the same add Parent nicknames)	dress; complete and at	Grandpare	ent	Mark here if you a		SI	Suffix
Mark here if the Tiger a Select relationship: -irst name (No initials or	adult partner is not living at the same add Parent nicknames)	dress; complete and at	Grandpare	ent	Mark here if you a		SI	ubscription
Mark here if the Tiger a Select relationship: -irst name (No initials or	adult partner is not living at the same add	dress; complete and att	Grandpare	ent	Mark here if you a		SI	Suffix
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address	adult partner is not living at the same add Parent nicknames)	dress; complete and att	Grandpare	ent	Mark here if you a	are the Tiger adult partner	SI	Suffix Zip code Gender:
Mark here if the Tiger a Select relationship: Inst name (No Initials or Country Mailing address	adult partner is not living at the same add	dress; complete and att	Grandpare	ent	Mark here if you a Other (specify)	are the Tiger adult partner	SI	Suffix Zip code Gender:
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address US Home phone	adult partner is not living at the same add Parent nicknames) Date of birth	Guardian Guardian Middle	Grandpare name City Occupation	ent	Mark here if you a Other (specify)	are the Tiger adult partner	SI	Suffix Zip code Gender:
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address US Home phone	adult partner is not living at the same add	dress; complete and att	Grandpare name City Occupation	ent	Mark here if you a Other (specify)	are the Tiger adult partner	SI	Suffix Zip code Gender:
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address US Home phone - Business phone -	Adult partner is not living at the same add Parent Parent Date of birth Ext. X	Guardian Guardian Middle	Grandpare name City Occupation	ent	Mark here if you a Other (specify)	are the Tiger adult partner	SI	Suffix Zip code Gender:
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address US Home phone - Business phone -	Adult partner is not living at the same add Parent Parent Date of birth Ext. X	Guardian Guardian Middle (mm/dd/yyyy) Previous Scout	Grandpare name City Occupation	ent Last nan	Mark here if you a Other (specify) ne Employ	are the Tiger adult partner	State -	Suffix Zip code Gender: M F
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address US Home phone - Business phone -	Adult partner is not living at the same add Parent Parent Date of birth Ext. X	Guardian Guardian Middle	Grandpare name City Occupation	ent Last nan	Mark here if you a Other (specify) Be Employ ave read the attached	are the Tiger adult partner	State :	Suffix Zip code Gender: M F
Mark here if the Tiger a Select relationship: First name (No initials or Country Mailing address US Home phone - Business phone -	Adult partner is not living at the same add Parent Parent Date of birth Ext. X	Guardian Guardian Middle (mm/dd/yyyy) Previous Scout	Grandpare name City Occupation	ent Last nan	Mark here if you a Other (specify) Be Employ ave read the attached	are the Tiger adult partner yer Cell phone	State :	Suffix Zip code Gender: M F
Select relationship: First name (No initials or	adult partner is not living at the same add Parent nicknames) Date of birth Ext. - X	Guardian Guardian Middle (mm/dd/yyyy) Previous Scout	Grandpare name City Occupation ing experience	ent Last nan	Mark here if you a Other (specify) Be Employ ave read the attached	cell phone Cell phone Information for parents ar	State :	Suffix Zip code Gender: M F



CHECKANDI TORNANDI







