BSA YOUTH MEMBER APPLICATION

YOUTH INFORMATION	DSA TOOTT MEMBER AFF	LICATION	
First name (Full legal name)	Middle name Last n	name	Suffix Preferred nickname
Country Mailing address	City		State Zip code
USA			
Phone Date of	birth (mm/dd/yyyy) Grade E	thnic background:	Gender:
			OMale OFemale
School		Caucasian/White Calific Islander CAsiar	
		OHispanic/Latino OOther	○Scout Life subscription
PARENT// FOAL CHARRIAN INFORMATION			
PARENT/LEGAL GUARDIAN INFORMATION			
		Tiger adult partner is not living at the same address and col	mplete and attach an adult application.
Select relationship: OParent OLegal Guardian OGrand	dparent Oother (specify)		
First name (Full legal name)	Middle name Last n	ame	Suffix Preferred nickname
Country Mailing address	City		State Zip code
Primary phone Date of	birth (mm/dd/yyyy) Occupation	Employer	Gender:
	/ / /		OMale OFemale
Alternate phone Ext.	Previous Scouting experience		
- x			
I have read the attached information for parents and approve the	he		
application. I affirm that I have or will review How to Protect You Children From Child Abuse: A Parent's Guide.		Parent/legal guardian email address	
Grindren From Grind Abuse. A Farent's Guide.		areniviegal guardian email address	
Circulation of respect to a state of			
Signature of parent/legal guardian	Date To be completed by	unit	
	To be completed by	um	
Signature of unit leader (or designee)	Date		
(= : g/			
Unit type: OPack OTroop OCrew OShip	OLone Cub Scout OHas earned	If applicant has unexpired membership certificate, re	
Unit type: OPack OTroop OCrew OShip	OLone Cub Scout OLone Scout OLone Scout OLone Scout OLone Scout OLone Scout	no charge by transferring the registration or multiple	
Unit No.: For pack registration select one		OTransfer application Enter membership number	
OTHER TOTAL CONTRACTOR OF THE	: Olion OTiger OWolf ORear OWebelos		
	e: OLion OTiger OWolf OBear OWebelos	Multiple application from unexpired certificate:	Unit No. or district name:
	E: OLion OTiger OWolf OBear OWebelos	Multiple application from unexpired certificate:	

BSA YOUTH MEMBER APPLICATION

Country Mailing address City State Zip code Bate of birth (mm/dd/yyyy) Grade Ethnic background: OBlack/African American OAlasks Native Orerase OAskar Orerase School Other (paper) Other (p	YOUTH INFORMATION					
Phone Date of birth (mm/dd/yyyy) Grade Ethnic background: Gender: Make Oremate School Caucasam/White Oracin (bladkor American Oracin	First name (Full legal name)	Middle name	Last r	name		Suffix Preferred nickname
Phone Date of birth (mm/dd/yyyy) Grade Ethnic background: DisackArkcan American ONasida Native ORendic Islander Orendic Islan						
School	Country Mailing address	Ci	City			State Zip code
School	USA					
School Coalcasian/White	Phone	Date of birth (mm/dd/yyyy)	Grade E	thnic background:		Gender:
PARENT/LEGAL GUARDIAN INFORMATION Official Reveil address is same as above. Official partner. Sealest relationship. Perent Legal Guardian Grandparent Other (specify) First name (Full legal name) Middle name Last name Last name Suffix Perferred nickname Country Mailing address City State Zip code First name (Full legal name) Date of birth (mm/ddyyyy) Occupation Employer Gender: Country Mailing address State Zip code Alternate phone Date of birth (mm/ddyyyy) Occupation Employer Gender: I have read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide. Parent/legal guardian Date Date To be completed by unit If applicant has unexpired membership certificate, registration may be accomplished at no charge by transferring the registration or multiple registering. Thus read the samed Arrow or Light Date Country		/ / /		OBlack/African American	Native American OAlas	Male OFemale
PARENT/LEGAL GUARDIAN INFORMATION Othark here if address is same as above. Othark here if you are the Lion or Tiger adult partner. Select relationship: Operant Ocandoparent Other (specify) Parent Ocandoparent Ocandoparent Other (specify) Middle name Last name Suffix Preferred nickname First name (Full legal name) Middle name Last name Suffix Preferred nickname First phone Ext. Previous Scouting experience Ext. Previous Scouting experience Last name Farent/legal guardian email address For pack registration select one: OLion OTiger Wolf Ober (wheeleds) For pack registration select one: OLion OTiger Wolf Ober (Webelos) For pack registration select one: OLion OTiger Wolf Ober (Webelos) Unit No: Unit No: Other (specify) Other (spe	School			OCaucasian/White	Pacific Islander OAsia	.n
OMark here if address is same as above. OMark here if you are the Lon or Tiger adult partner. Select relationship: Oparent OLegal Guardian OGrandparent Other (specify) First name (Full legal name) Middle name Last name Suffix Preferred nickname County Mailing address City State Zip code Primary phone Date of birth (mm/dd/yyyy) Occupation Employer Gender: Previous Scouting experience Last name To be completed by unit For pack registration select one: OLion Origer Owolf Ober of Webelos For pack registration select one: OLion Origer Owolf Ober Owolf				OHispanic/Latino	Other	OScout Life subscription
Select relationship:	PARENT/LEGAL GUARDIAN INFORMATIO	ON				
First name (Full legal name) Middle name Last name Suffix Preferred nickname Country Mailing address City State Zip code Primary phone Date of birth (mm/dd/yyyy) Occupation Employer Gender: Alternate phone Ext. Previous Scouting experience Last name Suffix Preferred nickname Finally phone Country Mailing address City State Zip code Last name Suffix Preferred nickname Finally phone Country Mailing address City Country Mailing address Primary phone Date of birth (mm/dd/yyyy) Occupation Employer Gender: Alternate phone Ext. Previous Scouting experience Last name Suffix Preferred nickname Finally phone Country Mailing address Previous Scouting experience Last name Suffix Preferred nickname Alternate phone Ext. Zip code Previous Scouting experience For mail have read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Onlider From Child Abuse: A Parent's Guide. Parent/legal guardian email address For be completed by unit If applicant has unexpired membership certificate, registration may be accomplished at no charge by transferring the registration multiple registering. Unit type: Pack OTroop OCrew Oship OLione Scout OLione Scout Online From Unitsplication Multiple application Multiple	OMark here if address is same as above. OMark here	e if you are the Lion or Tiger adult partner.	Mark here if the Lion or	Tiger adult partner is not living	g at the same address and co	omplete and attach an adult application.
Country Mailing address City State Zip code S A	Select relationship: OParent OLegal Guardian	Grandparent Other (specify)				
Primary phone Date of birth (mm/dd/yyyy) Occupation Employer Gender: OMale OFemale Alternate phone Ext. Previous Scouting experience Laternate phone Laternat	First name (Full legal name)	Middle name	Last r	name		Suffix Preferred nickname
Primary phone Date of birth (mm/dd/yyyy) Occupation Employer Gender: OMale OFemale Alternate phone Ext. Previous Scouting experience Laternate phone Laternat						
Alternate phone Ext. Previous Scouting experience Inave read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide. Parent/legal guardian Date Parent/legal guardian Date	Country Mailing address	Ci	City			State Zip code
Alternate phone Ext. Previous Scouting experience Inave read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide. Parent/legal guardian Date Parent/legal guardian Date	USA					
Alternate phone	Primary phone	Date of birth (mm/dd/yyyy)	Occupation		Employer	Gender:
I have read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide. Parent/legal guardian email address Parent/legal guardian email address		/ / /				OMale OFemale
I have read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide. Parent/legal guardian email address	Alternate phone	Ext. Previous Scouting	experience			
application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide. Parent/legal guardian email address To be completed by unit To be completed by unit Signature of unit leader (or designee) Date Unit type: Pack Troop Crew Ship Lone Cub Scout OLone Scout	x	x				
Signature of parent/legal guardian Date To be completed by unit Signature of unit leader (or designee) Date Unit type: Pack Troop Crew Ship Lone Cub Scout OLone Scout OL						
To be completed by unit Signature of unit leader (or designee) Date Unit type: Pack OTroop OCrew OShip OLone Cub Scout OLone Scout OLon	Children From Child Abuse: A Parent's Guide.	Protect Your		Parent/legal guardian el	mail address	
Signature of unit leader (or designee) Date Unit type: Pack Troop Crew Ship Lone Cub Scout OLone Sco			/			
Signature of unit leader (or designee) Date Unit type: OPack OTroop OCrew OShip OLone Cub Scout OLone Scout OLon	Signature of parent/legal guardian	Date				
Unit type: OPack OTroop OCrew OShip OLone Cub Scout OLone Scout OL		To be	e completed by	unit		
Unit type: OPack OTroop OCrew OShip OLone Cub Scout OLone Scout OL			,			
Unit type: OPack OTroop OCrew OShip OLone Cub Scout OLone Scout OL			/			
Unit type: OPack OTroop OCrew OShip OLone Cub Scout OLone Scout OL	Signature of unit leader (or designee)	Date				
Unit type: OPack OTroop OCrew OShip OLone Cub Scout OLone Scout OL		1		If applicant has unexpired	I membership certificate	registration may be accomplished at
Unit No.: For pack registration select one: OLion OTiger OWolf OBear OWebelos For pack registration select one: OLion OTiger OWolf OBear OWebelos Council No.: Unit OPack OTroop type:	Unit type: OPack OTroop OCrew					
Council No.: Unit OPack OTroop Unit No. or district name:	Lipit No : For pack registration s	l de la companya de	•	o manoror approautor.		1
type:	One No.	LIGHT O Higer O WOII C	O Deal O Webelos	о тапро арриоалог		Unit No. or district name:
					vpe:	
	Registration fee \$ Scout Life fe	ine \$ DAID: \(\sigma \)	Cach O Cha	ack No		

UNIT / APPLICANT COPY