

# SCOUTING AMERICA YOUTH MEMBER APPLICATION—Must be completed by the youth's parent or legal guardian

## YOUTH INFORMATION

First name (Full legal name)	Middle name	Last name	Suffix	Preferred nickname
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country	Home address	City	State	Zip code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone	Date of birth (mm/dd/yyyy)	Grade	Ethnic background:	Gender:
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	Black/African American Caucasian/White Hispanic/Latino	Male      Female
			Native American Pacific Islander Other	
School	Youth email address	<input type="checkbox"/> Scout Life subscription		
<input type="text"/>	<input type="text"/>			

## PARENT/LEGAL GUARDIAN INFORMATION

☐ Mark here if address is same as above. ☐ Mark here if you are the Lion or Tiger adult partner.

☐ Mark here if the Lion or Tiger adult partner is not the parent or legal guardian. Have the adult partner complete and attach an adult application and indicate their relationship below.

Select relationship: ☐ Parent ☐ Legal Guardian

First name (Full legal name)	Middle name	Last name	Suffix	Preferred nickname
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country	Home address	City	State	Zip code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Primary phone	Date of birth (mm/dd/yyyy)	Occupation	Employer	Gender:
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/>	Male      Female
Alternate phone	Ext.	Previous Scouting experience		
<input type="text"/> - <input type="text"/> - <input type="text"/> x <input type="text"/>		<input type="text"/>		

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*.

Signature of parent/legal guardian	Date	Parent/legal guardian email address
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

## To be completed by unit

Signature of unit leader (or designee)	Date
<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Unit type: ☐ Pack ☐ Troop ☐ Crew ☐ Ship

Unit No.:  For pack registration select one: ☐ Lion ☐ Tiger ☐ Wolf ☐ Bear ☐ Webelos

☐ Lone Cub Scout ☐ Has earned Arrow of Light  
☐ Lone Scout

If applicant has unexpired membership certificate, registration may be accomplished at no charge by transferring the registration or multiple registering.

<input type="checkbox"/> Transfer application	Enter membership number from unexpired certificate:	<input type="text"/>
<input type="checkbox"/> Multiple application		
Council No.:	Unit type:	Unit No. or district name:
<input type="text"/>	<input type="checkbox"/> Pack <input type="checkbox"/> Troop <input type="checkbox"/> Crew <input type="checkbox"/> Ship	<input type="text"/>

Registration fee \$  Council fee \$

Scout Life fee \$

PAID: ☐ Cash ☐ Check No. \_\_\_\_\_ ☐ Credit card