

This form is read by machine. Please print the numbers and letters as shown on the sample application.

**YOUTH MEMBERSHIP**

**Unit type: (Fill in the circle.)**

<input type="radio"/> Cub Scout Pack	<input type="radio"/> Boy Scout Troop	<input type="radio"/> Varsity Scout Team	<input type="radio"/> Venturing Crew	<input type="radio"/> Sea Scout Ship	<input type="radio"/> Lone Cub Scout
For pack registration select one: <input type="radio"/> Tiger Cub <input type="radio"/> Cub Scout <input type="radio"/> Webelos Scout			<input type="radio"/> Lone Boy Scout		
<input type="radio"/> Mark here if new to Scouting.	<input type="radio"/> Former Scout	<input type="radio"/> Former Venturer	<input type="radio"/> Former Sea Scout		<input type="radio"/> Arrow of Light earned

Unit No.:

If applicant has an unexpired membership certificate, registration may be accomplished in this unit by paying \$1 for processing the transfer. Mark and attach certificate. It will be returned by the council.

Transfer application    Transfer from council number:

Unit type:  Pack  Troop  Team  Crew  Ship    Unit No.:

Enter membership number from unexpired certificate:

Name and address information (Please print one letter in each space—press hard, you are making a copy.)

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

Country  Mailing address  City  State  Zip code

Home phone  -  -  Date of birth (mm/dd/yyyy)  /  /  Grade

School

Ethnic background:  Black/African American  Native American  Alaska Native  Asian

Caucasian/White  Hispanic/Latino  Pacific Islander  Other

Gender:  Male  Female

**Boys' Life subscription**

Parent/guardian information  Mark here if address is same as above.  I agree to be an active ScoutParent.  Mark here if you are the Tiger Cub adult partner.

Mark here if the adult partner/ScoutParent is not living at the same address; complete and attach an adult application.

Select relationship:  Parent  Guardian  Grandparent  Other (specify)

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

Country  Mailing address  City  State  Zip code

Home phone  -  -  Date of birth (mm/dd/yyyy)  /  /  Occupation  Employer  Gender:  M  F

Business phone  -  -  Ext.  X Previous Scouting experience  Cell phone  -  -

Parent/guardian email address  @

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/guardian (required if applicant is under 18 years of age)

Signature of unit leader (or designee)