## **BSA YOUTH MEMBER APPLICATION**

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**COUNCIL COPY** 

## **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
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PARENT/LEGAL GUARDIAN INFORMATION  Official Reveil address is same as above. Official partner. Sealect 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 a samed   Arrow or Light   Date   Date		/ / /		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)  Perent 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 Owolf Ober Owolf Owolf Ober Owolf Owolf Ober Owolf Owolf Owolf Owolf Ober Owolf Owol				OHispanic/Latino	Other	OScout Life subscription
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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
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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
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