# BOY SCOUTS OF AMERICA ADULT APPLICATION

This application is also available in Spanish. Esta solicitud también está disponible en español.

The mission of the Boy Scouts of America is to prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the Scout Oath and Scout Law.

In a Cub Scout pack, Boy Scout troop, Varsity Scout team, Venturing crew, or Sea Scout ship—or in any position in a district or council—your participation is a service to your community and helps youth become better citizens.

As members of the Boy Scouts of America, high-quality adult leaders are important role models for youth. This application helps the chartered organization to select qualified leaders to serve as volunteers. Thank you for completing this application in full. See instructions on the inside cover.

BY SUBMITTING THIS APPLICATION YOU ARE AUTHORIZING
A CRIMINAL BACKGROUND CHECK OF YOURSELF.
THIS CHECK WILL BE MADE FROM PUBLIC RECORD SOURCES.
YOU WILL HAVE AN OPPORTUNITY TO
REVIEW AND CHALLENGE ANY ADVERSE
INFORMATION DISCLOSED BY THE CHECK.

IF YOU WOULD LIKE A COPY OF YOUR CRIMINAL BACKGROUND REPORT, PLEASE CONTACT YOUR LOCAL COUNCIL OFFICE.

# **Youth Protection Training**

All applicants for membership are required to take this training within 30 days of registering. To take it online, go to www.MyScouting.org and establish an account using the member number you receive when you register. If you take the training online before you obtain a member number, be sure to return to MyScouting and enter your number for training record credit. Your BSA local council also provides training on a regular basis if you cannot take it online.

For more information, refer to the back of this application.



#### **Purpose of the Boy Scouts of America**

The purpose of the Boy Scouts of America is to promote, through cooperation with other agencies, the ability of youth to do things for themselves and others, and to teach youth patriotism, courage, self-reliance, and kindred virtues. In achieving this purpose, emphasis is placed upon the Boy Scouts of America's educational program and its oaths, promises, and codes for character development, citizenship training, and mental and physical fitness.

# **Excerpt From Declaration of Religious Principle**

The Boy Scouts of America maintains that no member can grow into the best kind of citizen without recognizing an obligation to God and, therefore, recognizes the religious element in the training of the

#### APPROVAL REQUIRED—UNIT SCOUTERS

**Unit committee chairman** approves all adult unit members except the chartered organization representative and committee chairman.

**Chartered organization head or chartered organization representative.** The chartered organization representative is approved by the head of the chartered organization. Following approval by the unit

member, but it is absolutely nonsectarian in its attitude toward that religious training. Its policy is that the home and organization or group with which the member is connected shall give definite attention to religious life. Only persons willing to subscribe to these precepts from the Declaration of Religious Principle and to the Bylaws of the Boy Scouts of America shall be entitled to certificates of leadership.

### **Leadership Requirements**

The applicant must possess the moral, educational, and emotional qualities that the Boy Scouts of America deems necessary to afford positive leadership to youth. The applicant must also be the correct age, subscribe to the precepts of the Declaration of Religious Principle, and abide by the Scout Oath or Promise, and the Scout Law.

committee chairman, all other adult unit members must be approved by the head of the chartered organization or the chartered organization representative.

**Scout executive or designee** must approve all unit Scouters.

#### APPROVAL REQUIRED—COUNCIL and DISTRICT SCOUTERS

Scout executive or designee must approve all council and district Scouters.

**Scouting magazine.** This magazine is sent to all registered, paid adult members.

**Boys' Life.** Registered adults get a special rate of \$12 a year (half the regular rate of \$24 a year). For a subscription to a great magazine and up-to-date information on boys and Scouting, just attach the appropriate amount and fill in the *Boys' Life* circle. Please calculate and remit the appropriate state and local taxes. On late registrations it may be necessary to deliver back issues.

Qualification. Adult citizens, or adult noncitizens who reside within the country, may register with the Boy Scouts of America in any capacity if they agree to abide by the Scout Oath or Promise and the Scout Law, to respect and obey the laws of the United States of America, and to subscribe to the precepts of the Declaration of Religious Principle. All leaders must be 21 years of age or older, except assistant Scoutmasters, assistant den leaders, assistant Cubmasters, assistant Webelos den leaders, and assistant Varsity Scout coaches, who must be 18 or older. No one may register in more than one position in the same unit, except the chartered organization representative (who can multiple only as the committee chairman (CC) or a committee member (MC)) and the ScoutParent unit coordinator (who may multiple as chartered organization representative (CR), assistant den leader (DA), assistant Webelos den leader (WA), assistant Scoutmaster (SA), assistant Varsity Scout Coach (VA), mate (MT), and Leader of 11-year-old Scouts (10)).

Youth Protection. Child abuse is a serious problem in our society, and unfortunately, it can occur anywhere, even in Scouting. Youth safety is of paramount importance to Scouting and is a driving force in everything we do. For that reason, the BSA continues to create barriers to abuse beyond what have previously existed in Scouting. Any suspected abuse of a child should be reported to the local authorities and the Scout executive. Any inappropriate conduct or violations of BSA policies should be immediately reported to the Scout executive.

**Ethnic Background Information.** The BSA receives inquiries from various agencies regarding racial composition. Please fill in the appropriate circle on the application to indicate ethnic background.

**BSA Privacy Policy.** The Boy Scouts of America protects the confidentiality of the names and personal information of those who are affiliated with the movement. No commercial or unauthorized use is made of the names, addresses, and other confidential information of members. Access to this information is strictly limited.

This application is designed to be an information-gathering aid. Answers given by the applicant may be verified.

#### **INSTRUCTIONS**

#### **Unit Scouters**

- 1. Complete and sign the top copy. Keep the back copy (applicant copy) and give the remaining copies to the committee chairman with the proper fees.
- After the application has been reviewed and, if necessary, references checked by the unit committee, secure the approvals.
   The process set forth in the publication Selecting Quality Leaders, No. 522-981, must be completed for all positions of Scoutmaster, assistant Scoutmaster, Varsity Coach, and assistant Varsity Coach.
- 3. The committee chairman keeps the unit copy, gives one copy to the chartered organization, and forwards the remaining copy to the local council service center for approval and processing.

#### **Council and District Scouters**

- 1. Complete and sign the application.
- 2. Send the proper fee and all three copies of the application to the local council service center for approval and processing.

|    | FEE CHART<br>Registration | Boys'<br>Life | CR<br>CC<br>MC<br>SM | UNIT POSITION CODE Chartered organization representative Committee chairman Committee member Scoutmaster |
|----|---------------------------|---------------|----------------------|--|
| 1  | 1.25                      | _             | SA                   | Assistant Scoutmaster  |
| 2  | 2.50                      | 2.00          | NL                   | Crew Advisor   |
| 3  | 3.75                      | 3.00          | NA<br>SK<br>MT       | Crew associate Advisor<br>Skipper<br>Mate  |
| 4  | 5.00                      | 4.00          | VC                   | Varsity Scout Coach  |
| 5  | 6.25                      | 5.00          | VA<br>CM             | Assistant Varsity Scout Coach<br>Cubmaster   |
| 6  | 7.50                      | 6.00          | CA<br>WL             | Assistant Cubmaster<br>Webelos den leader  |
| 7  | 8.75                      | 7.00          | WA<br>DL             | Assistant Webelos den leader Den leader  |
| 8  | 10.00                     | 8.00          | DA                   | Assistant den leader   |
| 9  | 11.25                     | 9.00          | TL<br>PT             | Tiger Cub den leader<br>Pack trainer   |
| 10 | 12.50                     | 10.00         | PC<br>10             | ScoutParent unit coordinator Leader of 11-year old Scouts (LDS Troop)                                    |
| 11 | 13.75                     | 11.00         | 88<br>96             | Lone Cub Scout friend and counselor  Lone Scout friend and counselor                                     |
| 12 | 15.00                     | 12.00         | Scout                | Parents (PS) and Tiger Cub adult partners (AP) lete the bottom portion of the youth application.         |

# Tips for completing the Application for Adult Membership: (Use blue or black ink)

- ➤ Print—do not use cursive.
- > Use black or dark blue ink.
- > Press firmly when printing.
- > Print one letter only in each box.
- ➤ Use upper-case letters and stay within the blue boxes for legibility.
- Fill in circles; do not use check marks.
- ➤ Make sure you have all needed signatures on application.
- ➤ Don't alter the application—it could affect the quality of the scan. Mailing address example:

| ı |   | 9 |   | <br>· . |   |   |   |   |   |   |  |
|---|---|---|---|---------|---|---|---|---|---|---|--|
|   | 7 | 0 | 3 | F       | Ι | R | S | T | S | T |  |

# **Instructions:**

Please read the Disclosure/Authorization Form on the back of this page. In the space provided at the bottom of the statement, fill in the spaces for your name, signature, and date to acknowledge your review of the form.

This Disclosure/Authorization Form and the Boy Scouts of America Adult Application must be signed and turned in together to complete the application process.

#### **DISCLOSURE/AUTHORIZATION FORM**

#### NOTICE TO APPLICANT REGARDING BACKGROUND CHECK

In order to safeguard the youth in our program, the Boy Scouts of America will procure consumer reports on you in connection with your application to serve as a volunteer, and the Boy Scouts of America may procure additional consumer reports at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The Boy Scouts of America has contracted with LexisNexis, a consumer reporting agency, to provide the consumer reports. LexisNexis may be contacted by mail at LexisNexis, 1000 Alderman Drive, Alpharetta, GA 30005 or by telephone at 800-845-6004.

The consumer reports may contain information bearing on your character, general reputation, personal characteristics, and mode of living. The types of information that may be obtained include but are not limited to Social Security number verification, sex offender registry checks, criminal records checks, inmate records searches, and court records checks. The information contained in these consumer reports may be obtained by LexisNexis from public record sources.

The consumer reports will not include credit record checks or motor vehicle record checks.

The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurate disclosure of the nature and scope of such reports by submitting a written request to LexisNexis at the address listed above. Additional notices for applicants in California, New York, Minnesota, and Oklahoma are provided.

#### APPLICANT'S ACKNOWLEDGMENT AND AUTHORIZATION

I have carefully read this notice and authorization form and I hereby authorize the Boy Scouts of America and LexisNexis to procure a consumer report, which as described above will include information relating to my criminal history as received from reporting agencies. I understand that this information will be used to determine my eligibility for a volunteer position with the Boy Scouts of America. I also understand that as long as I remain a volunteer, additional consumer reports may be procured at any time. I understand that if the Boy Scouts of America chooses not to accept my application or to revoke my membership based on information contained in a consumer report, I will receive a summary of my rights under the Fair Credit Reporting Act and contact information for the reporting agency, LexisNexis.

# ADDITIONAL NOTICES TO CALIFORNIA, MINNESOTA, OKLAHOMA, AND NEW YORK APPLICANTS

#### California

Under California law, the consumer reports described above that the Boy Scouts of America will procure on you are defined as investigative consumer reports. These reports will be procured in connection with your application to serve as a volunteer, and additional reports may be procured at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The reports may include information on your character, general reputation, personal characteristics, and mode of living.

Under section 1786.22 of the California Civil Code, you may inspect the file maintained on you by LexisNexis, during normal business hours and with proper identification. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication, by appearing at LexisNexis offices in person, during normal business hours and on reasonable notice, or by certified mail upon making a written request. You may also receive a summary of the information contained in this file by telephone. LexisNexis will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information. This written explanation will be provided whenever a file is provided to you for visual inspection. If you appear in person, you may be accompanied by one other person of your choosing, who must furnish reasonable identification.

# For Applicants in California, Minnesota, and Oklahoma Only

| You have the right to request a free copy of any report procured on you. | If you wish to receive a free |
|--|-------------------------------|
| copy of any report procured on you, check the box below.                 |                               |

I request a free copy of any report procured on me.

#### **New York**

As explained above, a consumer report will be requested in connection with your application, and additional consumer reports may be requested during the course of your service with the Boy Scouts of America. You have the right, upon request, to be informed whether or not a consumer report was requested and, if a consumer report was requested, of the name and address of the consumer reporting agency that furnished the consumer report.

My signature below indicates that I have read, understand, and accept the accompanying disclosures and acknowledgments.

| First name (No initials or nicknames) Please print. | Middle name |      | Last name |          | Suffix |
|---|-------------|------|-----------|----------|--------|
|   |             |      |           |          |        |
|   |             |      |           |          |        |
|   |             |      |           |          |        |
| Signature of applicant                              |             | Date |           | Unit No. |        |

| ADULT APPLICATION 524-501A  | This form is read by mach  | hine. Please print the n        | umbers and letters as s          | hown: 1 2 3               | 4 5 6 7 8 9              | 0 A B C D E F G H I   |
|---|--|---------------------------------|----------------------------------|---------------------------|--------------------------|---|
| Г   | UNIT SCOUTERS (Fill i  | in the circle.)                 |                                  | Council/district position | on                       | Scouting background.     Position Council Year  |
| The information obtained in this form is for the internal use of the BSA only.  | Troop Team C   | rew Ship Unit                   | OR                               |                           |                          |   |
|   |  |                                 |                                  | District name             |                          | Experience working with youth in other  |
| EXPIRE DATE / / /   | TERM MONTHS  | New leader Former le            | eader                            |                           |                          | organizations.  |
| If applicant has an unexpired membership certificate; registration may  | y be accomplished in this unit by pa   | aying \$1 for processing the tr | ansfer. Mark and attach certific | ate. It will be returned  | by the council.          | 3. Previous residences (for last five years).   |
| TRANSFER FROM: COUNCIL NO.  | TYPE OF UNIT   | UNIT NO.                        |                                  |                           |                          | City State  |
| Please print one letter in each space—press hard; you are making thre   | •  | Lost name                       |                                  |                           | Cuffix                   |   |
| First name (No initials or nicknames)   | Middle name  | Last name                       |                                  |                           | Suffix                   | 4. Current memberships (religious, community,   |
|   |  |                                 |                                  |                           |                          | business, labor, or professional organizations).  |
| •   | Fast Start training  | au                              |                                  | 0                         | <b>-</b>                 | 5. References. Please list those who are familiar   |
| Country Mailing address   |  | City                            |                                  | State                     | Zip code                 | with your character as it relates to working with youth. References will be checked when                    |
|   |  |                                 |                                  |                           |                          | necessary. Name   |
| Home phone Business   | phone  | Ext.                            | Cell phone                       |                           |                          | Telephone ()  |
|   |  | X                               |                                  | -                         | -                        | Telephone ()  |
| Date of birth (mm/dd/yyyy) Ethnic background:  Black/African American   | Native American Alaska Native  | Driver's lie                    | cense No.                        |                           | State                    | Name  |
| / / Caucasian/White   | Native American Alaska Native Hispanic/Latino Pacific Islanc   |                                 |                                  |                           |                          | 6. Additional information. Yes or No (Mark each answer.)  |
| Gender Social Security No. (required)   | Occupation   |                                 | Employer                         |                           |                          | a. Do you use illegal drugs?  |
| ○ M ○ F   |  |                                 |                                  |                           |                          | b. Have you ever been convicted of O a criminal offense? (If yes,   |
| Country Business address  |  | City                            |                                  | State                     | Zip code                 | explain below.)  c. Have you ever been charged with Child neglect or abuse?                                 |
|   |  |                                 |                                  |                           |                          | d. Has your driver's license ever   |
| Position Code Scouting position (description)   |  |                                 | Are you an Eagle Scout? D        | ate earned (mm/dd/yyy     | y)                       | (If yes, explain below.)  |
|   |  |                                 | Yes No                           | /                         | 1                        | e. Other than the above, is there any fact or circumstance involving you                                    |
| E-mail address Work (Select one) Home   |  | @                               |                                  |                           | Boys' Life               | or your background that would call<br>into question your being entrusted<br>with the supervision, quidance, |
| (Select Offe) Home  |  |                                 |                                  |                           | subscription             | and care of young people? (If yes, explain below.)  |
| I understand that: a. The information that I have provided may be verified, if necessary, by conta  | APPROVALS FOR Unavare of the control | of anything contrary to the inf | ormation stated in this applicat |                           |                          |   |
| or organizations named in this application, or by contacting any person or organization to that may have information concerning me, or by conducting a criminal backg | round check.   | procedures and this applican    | t meets the leadership qualifica | ations of the Boy Scout   | s of America:            |   |
| I hereby release and agree to hold harmless from liability any person or organithat provides information. I also agree to hold harmless the chartered organization.   | ration, local  |                                 |                                  |                           |                          |   |
| council, Boy Scouts of America, and the officers, employees, and volunteers to b. In signing this application, I have read the attached information and apply         | for  | committee chairman              |                                  | Date                      |                          | JNCIL AND DISTRICT SCOUTERS anything contrary to the information  |
| registration with the Boy Scouts of America. I agree to comply with the Cha<br>Bylaws, and the Rules and Regulations of the Boy Scouts of America and the             | e local council.   |                                 |                                  |                           | stated in this applic    | ation. This application has been reviewed rocedures and this applicant meets the                            |
| I affirm that the information I have given on this form is true and correct. I have Youth Protection training and will follow the Youth Protection guidelines.        | Signature of chart   | tered organization head or rep  | presentative                     | Date                      |                          | tions of the Boy Scouts of America:   |
| Signature of applicant  | Date (ACCEPTED) Signa  | ature of Scout executive or de  | signee                           | Date                      | Signature of Scout       | executive or designee Date  |
| 4001 Registration fee \$ .  | Boys' Life fee   |                                 | LOCAL COUN                       |                           | Retain on file for three |   |

| ADULT APPLICATION 524-501A  | This form is read by mach  | hine. Please print the n        | umbers and letters as s          | hown: 1 2 3               | 4 5 6 7 8 9              | 0 A B C D E F G H I   |
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|   |  |                                 |                                  |                           |                          | business, labor, or professional organizations).  |
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|   |  |                                 |                                  |                           |                          | necessary. Name   |
| Home phone Business   | phone  | Ext.                            | Cell phone                       |                           |                          | Telephone ()  |
|   |  | X                               |                                  | -                         | -                        | Telephone ()  |
| Date of birth (mm/dd/yyyy) Ethnic background:  Black/African American   | Native American Alaska Native  | Driver's lie                    | cense No.                        |                           | State                    | Name  |
| / / Caucasian/White   | Native American Alaska Native Hispanic/Latino Pacific Islanc   |                                 |                                  |                           |                          | 6. Additional information. Yes or No (Mark each answer.)  |
| Gender Social Security No. (required)   | Occupation   |                                 | Employer                         |                           |                          | a. Do you use illegal drugs?  |
| ○ M ○ F   |  |                                 |                                  |                           |                          | b. Have you ever been convicted of O a criminal offense? (If yes,   |
| Country Business address  |  | City                            |                                  | State                     | Zip code                 | explain below.)  c. Have you ever been charged with Child neglect or abuse?                                 |
|   |  |                                 |                                  |                           |                          | d. Has your driver's license ever   |
| Position Code Scouting position (description)   |  |                                 | Are you an Eagle Scout? D        | ate earned (mm/dd/yyy     | y)                       | (If yes, explain below.)  |
|   |  |                                 | Yes No                           | /                         | 1                        | e. Other than the above, is there any fact or circumstance involving you                                    |
| E-mail address Work (Select one) Home   |  | @                               |                                  |                           | Boys' Life               | or your background that would call<br>into question your being entrusted<br>with the supervision, quidance, |
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|   |  |                                 | Yes No                           | /                         | 1                        | e. Other than the above, is there any fact or circumstance involving you                                    |
| E-mail address Work (Select one) Home   |  | @                               |                                  |                           | Boys' Life               | or your background that would call<br>into question your being entrusted<br>with the supervision, quidance, |
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| registration with the Boy Scouts of America. I agree to comply with the Cha<br>Bylaws, and the Rules and Regulations of the Boy Scouts of America and the             | e local council.   |                                 |                                  |                           | stated in this applic    | ation. This application has been reviewed rocedures and this applicant meets the                            |
| I affirm that the information I have given on this form is true and correct. I have Youth Protection training and will follow the Youth Protection guidelines.        | Signature of chart   | tered organization head or rep  | presentative                     | Date                      |                          | tions of the Boy Scouts of America:   |
| Signature of applicant  | Date (ACCEPTED) Signa  | ature of Scout executive or de  | signee                           | Date                      | Signature of Scout       | executive or designee Date  |
| 4001 Registration fee \$ .  | Boys' Life fee   |                                 | LOCAL COUN                       |                           | Retain on file for three |   |

# **Training for New Volunteers**

(Every Youth in Scouting Deserves a Trained Leader)



Welcome to Scouting! As a new Scout volunteer, you are joining our Scouting family, and we want you to understand how the program works. The Boy Scouts of America is committed to your success as a volunteer while serving young people. To help you be successful there are training materials designed for you.

# So, How Do I Begin? Online or Through Your Council Service Center!

Fast Start training for Cub Scout, Boy Scout, Varsity, and Venturing leaders as well as Youth Protection training programs are available at www.scouting.org/training or through your local council's website. Don't know your council's web address? Go to www.scouting.org/localcouncillocator for assistance. Additional training opportunities and resources are available through your local council. All applicants for membership are required to complete Youth Protection training within 30 days of registering.

Cub Scout leaders are considered trained when they have completed Cub Scout Leader Fast Start training\*, Youth Protection training\*, Cub Scout Leader Position-Specific Training\* (for their

| Scoutmasters and assistant Scoutmasters are considered trained when they have completed Boy Scout Leader Fast Start training*, Youth Protection training*, This Is Scouting*, Scoutmaster and       |
|---|
| Assistant Scoutmaster Leader Specific Training, and Introduction to Outdoor Leader Skills.  |
| <b>Troop committee members</b> are considered trained when they have completed Boy Scout Leader Fast Start training*, Youth Protection training*, This Is Scouting*, and the Troop Committee        |
| Challenge* as their leader-specific training.   |
| Varsity Scout leaders and assistants are considered trained when they have completed Varsity Scout Leader Fast Start training*, Youth Protection training*, This Is Scouting*, Varsity Scout Leader |
| Specific Training, and Introduction to Outdoor Leader Skills.   |
| Venturing crew Advisors, assistant Advisors, and crew committee members are considered trained when they have completed Venturing Advisor Fast Start training*, Youth Protection training*,         |
| This Is Scouting* and Venturing Leader Specific Training (and Introduction to Outdoor Leader Skills for outdoor crews only)   |

# **What Is Youth Protection Training?**

We seek to create as safe an environment as possible for young people to enjoy our program's activities. The Boy Scouts of America Youth Protection training addresses strategies for personal safety awareness for youth as well as adults. Age-appropriate programs and DVD materials include:

- Youth Protection Guidelines: Training for Volunteer Leaders and Parents—Adults come away with a much clearer awareness of the kinds of abuse, the signs of abuse, and how to respond and report should a situation arise. Youth Protection training must be taken every two years.
- Youth Protection Guidelines: Training for Adult Venturing Leaders—Designed to give guidance to the leaders in our teenage coed Venturing program. Supervision and relationship issues have a different focus regarding personal safety with this age group. Youth Protection training must be taken every two years.
- It Happened to Me—Developed for Cub Scout-age boys from 6 to 10 years old and their parents. It addresses the four rules of personal safety: Check first, go with a friend, it's your body, and tell.
- A Time to Tell—A video for Boy Scout—age boys from 11 to 14 years old—the target group for most molesters. It stresses the three R's of youth protection: Recognize, Resist, and Report.
- Youth Protection: Personal Safety Awareness—Developed for youth ages 13 through 20 in the coeducational Venturing program. It deals with issues pertinent to this age group.

Youth Protection training is available online at www.MyScouting.org. You can establish an account there using the member number you receive when you register. If you take the online training before you receive a member number, be sure to return to MyScouting and enter your number for training record credit.



The Boy Scouts of America has Youth Protection policies to protect youth, and these same policies help protect adult volunteers.

These and other key policies are addressed in the training:

Two-deep leadership—There must always be at least two adults on all trips and outings.

No One-on-One Contact—One-on-one contact between adults and youth members is not permitted.

Respecting Privacy—Adult leaders must respect the privacy of youth members and their own privacy in situations such as changing clothes or using restroom and shower facilities.

Separate accommodations—No youth is permitted in the tent or room of an adult other than their own parent or guardian.

Reporting problems—All violations of the law and BSA policies are to be reported as directed in the BSA's *Guide to Safe Scouting* and other BSA policy materials.

Adults must follow the policies and insist others always follow them.

**ScoutParents** has been designed to increase youth and parent recruitment, retention, advancement, participation, dedication, and a passion for Scouting. Your involvement and commitment is essential to the success of your child's Scouting experience. We encourage the parents (guardians) for each child to:

- 1. Participate with them.
- 2. Go to and observe their meetings.

position), and This Is Scouting.\*

3. Be part of their unit's program—both weekly meetings and outings.

To learn more, go to www.scouting.org/scoutparents.

\*Available online at www.scouting.org/training.

- 4. Support the program financially.
- 5. Coach them on their advancement and earning of recognition awards.
- 6. Help in at least one support role during the year.
- 7. Take Youth Protection training (available online).

