

# 66<sup>th</sup> Confluence BPSA Group Youth Registration



The 66th Confluence is the St. Louis, Missouri outpost of the Baden-Powell Service Association (BPSA-US) chartered in September 2012. This program is open to boys and girls, men and women, and focused on a traditional, open and inclusive outdoor program. The program is entirely volunteer run and depends upon the participation of both adults and children to succeed. The information will be kept confidential and contact information will not be shared with other entities.

Scouts will not be able to participate unless a current medical release and liability waiver has been signed and returned to the Group Scout Master.

<b>1<sup>st</sup> Scout</b>		
Name		
Street Address		City State, ZIP
Email	Phone	Preferred Contact <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Either
<b>2<sup>nd</sup> Scout</b> (sibling sharing address)		
Name		
<b>3<sup>rd</sup> Scout</b> (sibling sharing address)		
Name		
<b>1<sup>st</sup> Parent/Guardian</b>		<input type="checkbox"/> Same Contact Info
Name		
Street Address		City State, ZIP
Email	Phone	Preferred Contact <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Either
Experience with Scouting <input type="checkbox"/> Youth <input type="checkbox"/> Adult <input type="checkbox"/> None		Interested in leadership* <input type="checkbox"/> Yes <input type="checkbox"/> No
Interested in participating in the Rover Crew <input type="checkbox"/> Yes <input type="checkbox"/> No		Interested in other volunteering opportunities <input type="checkbox"/> Yes <input type="checkbox"/> No
Special skills or assistance this adult can provide:		

\* These include registered group scout master (GSM), section leader, first aid officer, committee chairperson, membership coordinator, treasurer, and so on. Parent involvement is essential to the success of a scouting program, particularly in its earliest stages. All BPSA leaders are required to be registered as Rovers to provide them with a more solid background in Scouting.

<b>2<sup>nd</sup> Parent/Guardian</b>		<input type="checkbox"/> Same Contact Info
Name		
Street Address		City      State, ZIP
Email	Phone	Preferred Contact <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Either
Experience with Scouting <input type="checkbox"/> Youth <input type="checkbox"/> Adult <input type="checkbox"/> None		Interested in leadership* <input type="checkbox"/> Yes <input type="checkbox"/> No
Interested in participating in the Rover Crew <input type="checkbox"/> Yes <input type="checkbox"/> No		Interested in other volunteering opportunities <input type="checkbox"/> Yes <input type="checkbox"/> No
Special skills or assistance this adult can provide:		
<b>Additional Information</b>		
<b>1<sup>st</sup> Scout</b>		
Birth date __/__/____		School
Interests related to scouting		
Special Needs <input type="checkbox"/> None <input type="checkbox"/> IEP in place <input type="checkbox"/> 504 in place <input type="checkbox"/> Mobility concerns <input type="checkbox"/> Behavior concerns <input type="checkbox"/> Dietary –Restriction_____ <input type="checkbox"/> Dietary –Allergies_____		
<input type="checkbox"/> Dietary – Sensitivities _____ <input type="checkbox"/> Other _____		
<b>2<sup>nd</sup> Scout</b>		
Birth date __/__/____		School
Interests related to scouting		
Special Needs <input type="checkbox"/> None <input type="checkbox"/> IEP in place <input type="checkbox"/> 504 in place <input type="checkbox"/> Mobility concerns <input type="checkbox"/> Behavior concerns <input type="checkbox"/> Dietary –Restriction_____ <input type="checkbox"/> Dietary –Allergies_____		
<input type="checkbox"/> Dietary – Sensitivities _____ <input type="checkbox"/> Other _____		
<b>3<sup>rd</sup> Scout</b>		
Birth date __/__/____		School
Interests related to scouting		
Special Needs <input type="checkbox"/> None <input type="checkbox"/> IEP in place <input type="checkbox"/> 504 in place <input type="checkbox"/> Mobility concerns <input type="checkbox"/> Behavior concerns <input type="checkbox"/> Dietary –Restriction_____ <input type="checkbox"/> Dietary –Allergies_____		
<input type="checkbox"/> Dietary – Sensitivities _____ <input type="checkbox"/> Other _____		

\* These include registered group scout master (GSM), section leader, first aid officer, committee chairperson, membership coordinator, treasurer, and so on. Parent involvement is essential to the success of a scouting program, particularly in its earliest stages. All BPSA leaders are required to be registered as Rovers to provide them with a more solid background in Scouting.