

YOUTH INFORMATION

EXPLORING YOUTH APPLICATION

If applicant has an unexpired participant certificate, participation may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.

Origin Design

Transfer application

Transfer from council no.:

Exploring Post

Exploring Club

Number: 4155

Name and address information

First name (No initials or nicknames)	Middle name	Last name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Country	Mailing 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)*	Grade
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>

Ethnic background:

Black/African American
 Native American
 Alaska Native
 Asian
 Caucasian/White
 Hispanic/Latino
 Pacific Islander
 Other

Gender: Male Female

School

Email address (for youth 13 years of age or older)

Parent/guardian information

Select relationship: Parent Legal guardian

First name (No initials or nicknames)	Middle name	Last name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Country	Mailing address (If same as above, click here.) <input type="radio"/>	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"/>	<input type="radio"/> M <input type="radio"/> F

Alternate phone	Ext.	Previous Exploring experience
<input type="text"/> - <input type="text"/> - <input type="text"/>	X <input type="text"/>	<input type="text"/>

Parent/guardian email address

Exploring Post Exploring Club Number:

Signature of post advisor or club sponsor

Date

Participation fee \$. Paid: Cash Check No. _____ Credit card

I have read the Information for Parents on page 2 and approve this application.

Signature of parent/guardian

Signature of Explorer

*Applicants 18 through 20 years old must complete an adult application.

524-009

Retain on file for three years.