

NYLT Parent of Staffer Agreement

Your Scout has been chosen for and agreed to staff NYLT. This position carries with it certain responsibilities that we are hoping you can help them achieve.

They have signed an agreement that states the following:

- I agree to staff Seneca Waterways NYLT, and I will pay the \$110.00 staff fee 60 days prior to start of course. I am aware that there may be additional fees (many of which are optional) related to staffing - Luxury Tax, apparel fees, etc. I understand that there may be campership funds available if needed.
- All my actions will exemplify the values of the Boy Scouts of America and therefore “set the example” for all Scouts. I will abide by the BSA Scouter Code of Conduct. I will wear the proper complete uniform for my registered program as required.
- I will attend NYLT staff / training meetings, the pre-course preparation events, and the entire course unless other arrangements are made in advance. I am aware that **I am obligated to attend staff development sessions prior to camp.**
- I am aware that I may be asked to help promote NYLT and recruit youth to attend NYLT. Doing so may require me to travel to nearby locations, or attend certain activities where Scouts gather. I am aware that my course may be canceled if it does not achieve certain minimum attendance numbers.
- This position requires completion of the following trainings: BSA Youth Protection, Hazardous Weather, Unlawful Harassment Prevention and NYLT Specific Health and Safety (annually). I may need to take other trainings in order to be qualified for Camp Staff. By staffing an NYLT program, I am also eligible to attend NYLT Leadership Academy should I choose to do so.
- I will provide a current Annual Health and Medical Record before I participate in any event and will supply an updated form if the existing one is superseded.
- I understand that I will be under the supervision of the Scoutmaster and other adult staff and will not leave any NYLT activity areas without permission. I understand that the success of NYLT is a team effort and that the Scoutmaster, Senior Patrol Leader or other staff may assign other duties to me. I will be responsible for, and will account for, the equipment and supplies assigned to me.
- I understand that my position is voluntary with no pay other than room and board.
- The Seneca Waterways Council reserves the right to terminate this agreement, in writing, for any reason, with or without cause.
- I will be a membership fees-paid, registered member of the Boy Scouts of America. If 18 years old or older, be registered as an adult member of the Boy Scouts of America, which includes passing a Criminal Background Check and Sex Offender Registry Check, as required by the State of New York. If under 18, be registered as a Camp Staff member by completing the BSA Youth Application Form.
- Submit necessary paperwork and complete trainings by the deadlines required.
- The NYLT staff member indicates their acceptance of the terms above by affixing their signature. For staff members under the age of 18, you must affix your signature here *AND* complete the separate 'Parent of Staffer Agreement' as well.

NYLT Parent of Staffer Agreement

- A list of Staff Development dates has been provided to your Scout in the Course Staff Supplement. You can help your Scout by adding these dates to your Family Calendar.

- Your Scout has agreed to the above, and has complete details about each item. We are notifying you so that you are aware, and so that a conversation between you and your Scout can be initiated. Further, if your Scout is unsure, they know to contact their SPL or Scoutmaster to find out the answers.

- I have reviewed the sections above and my Scout has answered any questions I have.

- I have received and reviewed the information regarding meningococcal meningitis contained in the Staff Quick-Start Packet. I am aware that in New York State, meningococcal immunization is required to attend schools. My child has received meningococcal immunization (Menactra or Menveo) within the past 10 years.

Parent Signature _____ Date _____

(Please print clearly) Name of Staffer: _____