

## **Troop 5/Crew 5 Application Instructions** **For both Youth and Adult Apps**

Please be sure you are using the correct form. There are separate forms for Troop 5B (boys), Troop 5G (girls) and Crew 5 (co-ed). There are also separate Adult forms for Troop 5B, Troop 5G and Crew 5. The file names indicate the Unit (T5B/T5G/C5) and level (Youth/Adult) they are intended for.

Anyone 18 years of age or older must use the Adult form, even if they are a Scout.

1. The Application form is designed to be filled out on a computer as an interactive PDF. Please fill the form out completely on a computer and print it out for signatures. Incomplete forms will be returned. The form may be filled out by hand but please write legibly if you do. Illegible forms will be returned.
2. For Youth Apps, both the Parent/Guardian and the Scoutmaster must sign the form.
3. For Adult Apps, both the Applicant and the Charter Organization Rep (COR) must sign the form.
4. Turn the completed, signed form into the Troop/Crew Registrar, who will process it through the local council.
5. Dues payment should be made out to either "Troop 5" or "Crew 5". See the Treasurer for the current dues amount.
6. Scouts and/or adults are not officially part of the Troop or Crew until the application has been turned in to the local council. Unregistered youth and adults are not covered by the BSA insurance policies.
7. Adult Apps (for anyone 18 years or older) must be accompanied by a certificate of completion for the BSA *Youth Protection Training* (YPT) and a Background Check form. The YPT training may be taken on-line at [www.my.scouting.org](http://www.my.scouting.org). Upon completion, a PDF certificate will be issued that must be sent to the Troop/Crew Registrar. Please note that it can take up to 48 hours for the YPT system to generate the certificate. YPT must be renewed every 24 months. The YPT certificate should be sent to: [registrar.T5C5@Troopmaster.email](mailto:registrar.T5C5@Troopmaster.email). Questions on the application process can be sent to this address, as well.

All Adult Apps must also include the completed, signed *Additional Disclosures & Background Check Authorization* form. The form must be hand signed and turned in with the App and the YPT certificate. All three documents are required in order to process an Adult App.

8. Included with this application is a copy of our *Conduct Agreement* for the Troop and Crew that all Scouts and Adults are held to. Please read it carefully and discuss it with your Scout (for Youth Apps).
9. Here are the principal contact addresses for our Troop/Crew Leaders:
  - a. Troop 5 – Scoutmaster & Committee Chair for both T5B and T5G – [Scoutmaster.T5C5@troopmaster.email](mailto:Scoutmaster.T5C5@troopmaster.email)
  - b. Crew 5 – Crew Advisor & Committee Chair for Crew 5 – [CrewAdvisor.T5C5@troopmaster.email](mailto:CrewAdvisor.T5C5@troopmaster.email)
  - c. Registrar for Troop 5 & Crew 5 – [Registrar.T5C5@troopmaster.email](mailto:Registrar.T5C5@troopmaster.email)
  - d. Treasurer for Troop 5 & Crew 5 – [Treasurer.T5C5@troopmaster.email](mailto:Treasurer.T5C5@troopmaster.email)

Please direct any questions you may have to the above leaders of Troop 5 and Crew 5. Welcome aboard.

BOY SCOUTS OF AMERICA  
WILMETTE TROOP 5 & CREW 5  
CONDUCT AGREEMENT

As a member (a "Scout") of Troop 5 or Crew 5, I understand that I must be on my best behavior during all meetings, events and other activities in which Troop 5 or Crew 5 participates (each, a "Scouting activity"). I further understand that misbehavior and inappropriate activities will not be tolerated. I will remember that a Scout is Courteous, Kind and Friendly. The Troop and Crew will work together as a team.

I agree to live by and practice the Scout Oath, the Scout Law and the Outdoor Code.

I understand that behavior that is not allowed at any Scouting activity includes (but is not limited to):

- Repeatedly disobeying youth or adult leaders.
- Hazing or bullying of other Scouts.
- Foul or inappropriate language, materials or activities of any kind.
- Hitting, fighting or similar actions.
- Engaging in an action that could endanger myself or others.
- Leaving the area in which the Scouting activity is occurring without an adult leader's permission (other than routine departures following troop meetings and the like).
- Lying, cheating, or stealing.
- Being disruptive or uncooperative.
- Intentionally damaging property or equipment.

I understand that this is not a complete list, and that my youth and adult leaders expect me to exercise good judgment in living by the Scout Oath, Scout Law, and Outdoor Code. Any behaviors that are counter to the Scout Oath, Scout Law, and Outdoor Code that are not specifically listed here (in other words, anything else that an adult or youth leader finds unacceptable from a Scout) will be addressed to me by an adult scout leader.

I will be given the opportunity to explain my thoughts and actions related to the behavior. I will be asked to reflect on the impact my behavior caused other individuals and the Troop or Crew and to develop a plan for ensuring the behavior does not reoccur or continue.

Troop 5 and Crew 5 adult leaders have the responsibility of helping and correcting any problem they encounter. If the unacceptable behavior persists or an official warning is ignored, an adult leader may contact my parent(s) or guardian(s) about the problem and involve them in helping me live up to these rules and the Scouting values.

Please print one letter in each space—press hard; you are making two copies.

# BSA ADULT APPLICATION

First name (No initials or nicknames)

Middle name

Last name

Suffix

Preferred nickname:

Country  Home address  City  State  Zip code

Home phone  -  -  Business phone  -  -  X  Ext.  Cell phone  -  -

Date of birth (mm/dd/yyyy)  /  /  Ethnic background:  Black/African American  Native American  Alaska Native  Asian  Caucasian/White  Hispanic/Latino  Pacific Islander  Other Driver's license No.  State

Gender  M  F Social Security No. (required)  -  -  Occupation  Employer

Country  Business address  City  State  Zip code

Position Code  Scouting position (description)  Are you an Eagle Scout?  Yes  No Date earned (mm/dd/yyyy)  /  /

Email address (Select one)  Work  Home  @   Boys' Life subscription

I hereby certify that:  
1. I have read and affirm that I accept the Declaration of Religious Principle. I agree to comply with the rules and regulations of the BSA and the local council, including the Scouter Code of Conduct. INITIALS REQUIRED   
Signature of applicant Date  
2. I affirm that the information contained in this application is true and accurate to the best of my knowledge and belief. INITIALS REQUIRED  YPT completion certificate attached  Background Check Authorization form attached

## To be completed by unit

Careful review of the information provided on this application is a significant step in Scouting's efforts to protect its youth members and deliver a quality program.

APPROVALS FOR UNIT ADULTS: I have reviewed this application and the responses to any questions answered "Yes," and have made any follow-up inquiries necessary to be satisfied that the applicant possesses the moral, educational, and emotional qualities to be an adult leader in the BSA.

APPROVAL FOR COUNCIL AND DISTRICT ADULTS: I have reviewed this application and have made any follow-up inquiries necessary to be satisfied that the applicant possesses the moral, educational, and emotional qualities to be an adult leader in the BSA.

Date

Date

If applicant has an unexpired membership certificate, registration may be accomplished at no charge by transferring the registration.

Unit type:  Pack  Troop  Crew  Ship  Former leader  Participant  Multiple registration  New leader  Position change  Transfer application  
Transfer from council number:  Unit type:  Pack  Troop  Crew  Ship Unit No.:   
District name  OR   
Term:  Months Registration fee \$  Boys' Life fee \$   
Enter membership number from unexpired certificate:

All questions MUST be answered. Write NONE if applicable.

- Scouting background. Position  Council  Year
- Experience working with youth in other organizations. Please provide contact information.
- Previous residences (for last 10 years). City  State
- Current memberships (religious, community, business, labor, or professional organizations).
- References. Please list those who are familiar with your character. References may be checked. Name  Telephone   
Name  Telephone   
Name  Telephone
- Additional information. (Mark each answer.) Yes No  
  - Have you ever been removed from or asked to leave a leadership position in an organization due to allegations regarding your personal conduct or behavior? Explain:
  - Do you use illegal drugs or abuse alcohol? Explain:
  - Have you ever been arrested for a criminal offense (other than minor traffic violations)? Explain:
  - Has your driver's license ever been suspended or revoked? Explain:
  - Have you ever been investigated for, accused of, or charged with abuse or neglect of a minor child? Explain:
  - Are you aware of any reason not listed above that may call into question your suitability to supervise, guide, care for, and lead young people?

## **BACKGROUND CHECK DISCLOSURE**

A consumer report is a background check in which information (which may include, but is not limited to, criminal background, driving background, character, general reputation, personal characteristics, and mode of living) about you is gathered and communicated by a consumer reporting agency (“CRA”) to Boy Scouts of America and/or its subsidiaries, affiliates, other related entities, successors, and/or assigns (the “Company”).

Company may obtain a consumer report on you to be used for employment purposes (in your case, this means for the purpose of evaluating you as a new or existing volunteer).

# ADDITIONAL DISCLOSURES & BACKGROUND CHECK AUTHORIZATION

## Additional Disclosures

*The state disclosures below are included because state law requires them to be provided in writing. Some of the below rights, notices, or information also may apply to individuals from, applying to, or volunteering in states not listed below. There may be additional requirements, options, or provisions applicable to you and you may have additional rights under applicable law that are not required to be disclosed to you in writing.*

**Minnesota:** You have the right to request a complete and accurate disclosure of the nature and scope of any consumer report from First Advantage, P.O. Box 105292, Atlanta, GA 30348, 800-845-6004.

**New York:** Boy Scouts of America and/or its subsidiaries, affiliates, other related entities, successors, and/or assigns (the "Company") may request or utilize subsequent consumer reports (other than investigative consumer reports) on you throughout your volunteer relationship with Company. Upon request, you will be informed whether or not a consumer report was requested, and if such report was requested, informed of the name and address of the CRA that furnished the report. Your written request should be made to Company at Boy Scouts of America, Membership Standards Team S201, 1325 West Walnut Hill Lane, P.O. Box 152079, Irving Texas 75015-2079. You may also contact the Company by email at [MembershipStandards@scouting.org](mailto:MembershipStandards@scouting.org).

## Authorization

(Please print)

Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Suffix \_\_\_\_\_

List any other names used (nickname, maiden/married last names): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

To the extent permitted by applicable law, I hereby consent to and authorize the Boy Scouts of America and/or its subsidiaries, affiliates, other related entities, successors, and/or assigns (the "Company") to procure consumer report(s), which may include criminal background check(s) and/or investigative consumer report(s) (as defined by applicable California state law), on my background from a consumer reporting agency ("CRA") or from an investigative consumer reporting agency ("ICRA"), as described in the **Background Check Disclosure** and the **California State Law Disclosures (Non-Credit)** (each of which I have received separately from the Company), as well as these **Additional Disclosures & Background Check Authorization**. I have reviewed and understand the information, statements, and notices in the **Background Check Disclosure** and the **California State Law Disclosures (Non-Credit)**, as well as these **Additional Disclosures & Background Check Authorization**. My authorization remains valid throughout my volunteer relationship with the Company, such that, to the extent permitted by applicable law, I agree Company can procure additional consumer report(s), which may include criminal background check(s), during my volunteer relationship without providing additional disclosures or obtaining additional authorizations. Except as otherwise prohibited by applicable law, I consent to and authorize the Company to share this information with Company's current or prospective clients, customers, others with a need to know, and/or their agents for business reasons (e.g., to place me in certain positions, work sites, etc.). I understand that, if I am selected for a volunteer position, a consumer report will have been conducted on me.

**For California, Minnesota, or Oklahoma individuals:** If you would like to receive from the CRA, the ICRA, or the Company (as applicable) a copy of the report that Company may procure, please check this box.

Signature \_\_\_\_\_ Date \_\_\_\_\_