

Scout Personal Data Collection Form

Name: _____ Nickname: _____
 BSA ID#: _____

Sex: M / F

Address: _____ Mailing: _____

Phone(s) Home: () _____ DOB: _/ _/ _
 _____: () _____ Grade: _____
 _____: () _____ School: _____

Email: _____

Joined Unit: _/ _/ _ Boys' Life: Y / N
 Cub From: _/ _/ _ Cub To: _/ _/ _ Highest Cub Badge: _____

Health form on file: Y / N
 Emergency Contact(s): _____ Phone: () _____ Class 1 Phys: _/ _/ _
 _____ Phone: () _____ Class 2 Phys: _/ _/ _
 Doctor: _____ Phone: () _____ Class 3 Phys: _/ _/ _
 Insurance: _____ Phone: () _____ Tetanus: _/ _/ _
 Insurance Policy: _____ Group: _____
 Medications: _____
 Allergies: _____
 Other: _____

Prior Experience:	From	To	Level	Unit #	Council #
	_/ _/ _	_/ _/ _	_____	_____	_____
	_/ _/ _	_/ _/ _	_____	_____	_____
	_/ _/ _	_/ _/ _	_____	_____	_____
	_/ _/ _	_/ _/ _	_____	_____	_____

Father: _____ Mother: _____
 Nickname: _____ Nickname: _____
 Guardian: Y / N Guardian: Y / N

Phone(s) Work: _____ Phone(s) Work: _____
 _____: _____
 _____: _____
 Email: _____ Email: _____

Drivers Lic: _____ ST: ____ Drivers Lic: _____ ST: ____
 Employer: _____ Employer: _____
 Occupation: _____ Occupation: _____

Vehicle(s) (year/make/model)	# Belts	Lic Plate	Hitch	Insurance (in thousands)		
				Per Person	Per Accident	Property
_____	_____	_____	Y / N	_____	_____	_____
_____	_____	_____	Y / N	_____	_____	_____

Remarks: _____

Adult Personal Data Collection Form

Name: _____ Nickname: _____
 BSA ID#: _____

Sex: M / F

Spouse: _____

Address: _____

Mailing: _____

Phone(s) Home: (____) _____
 _____: (____) _____
 _____: (____) _____
 _____: (____) _____

DOB: ____/____/____
 Drivers Lic: _____ ST: ____
 Employer: _____
 Occupation: _____

Email: _____

Boys' Life: Y / N Highest Scout Rank: _____ Eagle Date: ____/____/____

Joined Unit: ____/____/____ Became Leader: ____/____/____

Health form on file: Y / N Date
 Emergency Contact(s): _____ Phone: (____) _____ Class 1 Phys: ____/____/____
 _____ Phone: (____) _____ Class 2 Phys: ____/____/____
 Doctor: _____ Phone: (____) _____ Class 3 Phys: ____/____/____
 Insurance: _____ Phone: (____) _____ Tetanus: ____/____/____
 Insurance Policy: _____ Group: _____
 Medications: _____
 Allergies: _____
 Other: _____

<u>Vehicle(s) (year/make/model)</u>	<u># Belts</u>	<u>Lic Plate</u>	<u>Hitch</u>	<u>Insurance (in thousands)</u>		
				<u>Per Person</u>	<u>Per Accident</u>	<u>Property</u>
_____	_____	_____	Y / N	_____	_____	_____
_____	_____	_____	Y / N	_____	_____	_____

<u>Prior Service:</u>	<u>From</u>	<u>To</u>	<u>Level</u>	<u>Unit #</u>	<u>Council #</u>
	____/____/____	____/____/____	_____	_____	_____
	____/____/____	____/____/____	_____	_____	_____
	____/____/____	____/____/____	_____	_____	_____
	____/____/____	____/____/____	_____	_____	_____

Remarks: _____



BOY SCOUT TROOP 13

serving Chester & Deep River

P.O. BOX 65

CHESTER, CONNECTICUT 06412-0065

(860) 526-4336



Troop Guidelines Acknowledgement

Scouts,

Please find the attached Troop Guidelines prepared under the guidance of the Troop Committee with input from Parents and Leaders. The guideline document was prepared to provide the Scout and their Parent some direction in how the Troop operates and what is expected from the Scout as a member of the Troop. While the Guideline does not provide a complete description of the entire program, it streamlines some key components while adding some Troop specific rules as found under the "Your Responsibility as a Scout" section.

The Troop Committee requires that the Scout and a Parent read the attached document and return this page with signatures of both the Scout and a Parent.

The Troop Committee and Leaders wish to thank the parents for their input in creating this document.

Sincerely,

Troop 13

I acknowledge receiving and reading a copy of the Troop Guidelines.

Scout Signature: _____

Print Name: _____

Parent Signature: _____

Print Name: _____

Date: _____



BOY SCOUT TROOP 13
serving Chester & Deep River

P.O. BOX 65
CHESTER, CONNECTICUT 06412-0065
(860) 526-4336



Web Site/Photo Acknowledgement

The Boy Scout Council has requested that Troops secure permission from the Scouts and their parents prior to posting their name and Troop related photos on a web site or in publications. As such we request that the following be submitted by each participant.

By signing below, Boy Scout Troop 13 has permission to:

- o Post my name on the Troop 13's web site in the following format:
 - Scouts: *First Name Last Initial*
 - Scouters/Adult Leaders (over 18): *First Name Last Name*
- o Use photos taken at any Troop function in their publications, such as, but not limited to, Troop 13's web site, Troop brochures, Troop pamphlets or in the local newspapers.

Private information such as personal e-mail, phone and addresses will not be used.

The Adult Leaders and volunteer webmaster have my permission to post the Scout and or Scouters name as described above and/or images from Troop related activities on the Troop Website and/or in publications as noted. I understand that this information will be publicly available.

Scout Signature: _____ **Print Name:** _____

Parent Signature: _____ **Print Name:** _____

Date: _____

~~~~~  
**Scouters/Adult Leaders:** *(please fill out a separate form from your Scout)*

Adult Leader Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_