



# Crossroads of America Council Adult Application

All fields must be completed in order to process your registration.

<b>First name (Full legal name)</b> <b>REQUIRED</b>		Middle name	<b>Last name</b> <b>REQUIRED</b>		Suffix
Country	<b>Home Address</b> <b>REQUIRED</b>			<b>Date of Birth (mm/dd/yyyy)</b> <b>REQUIRED</b>	
City	State		Zip	<b>Social Security Number (required)</b> <b>REQUIRED</b>	
<b>Ethnic background:</b> <input type="radio"/> Black/African <input type="radio"/> Caucasian/White <input type="radio"/> Native American <input type="radio"/> Hispanic/Latino <input type="radio"/> Alaska Native <input type="radio"/> Pacific Islander <input type="radio"/> Asian <input type="radio"/> Other		<b>Gender:</b> <input type="radio"/> M <input type="radio"/> F		<input type="radio"/> <b>Scout Life subscription</b>	
<b>Primary phone</b> <b>REQUIRED</b>		<b>Alternate phone</b>		<b>Extension</b>	
Please select your preference of communication: <input type="radio"/> Email <input type="radio"/> Phone Call <input type="radio"/> SMS/Text					
<b>Email address</b>		Occupation			
Are you an Eagle Scout? Yes <input type="radio"/> No <input type="radio"/>		If so, enter date earned Eagle (mm/dd/yyyy)		Employer	

All questions MUST be answered. Write NONE if not applicable.

1. Scouting background. POSITION COUNCIL YEAR	3. Previous residences (for last 10 years). CITY STATE	b. Have you ever been arrested for a criminal offense (other than minor traffic violations)? Explain: Yes No
2. Experience working with youth in other organizations. Please provide contact information for at least two below.	4. Current memberships (religious, community, business, labor, or professional organizations).	c. Has your driver's license ever been suspended or revoked? Explain: Yes No
Organization Contact name Phone	5. Additional information. (Mark each answer.) a. 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: Yes No	d. Have you ever been investigated for, accused of, or charged with abuse or neglect of a minor child? Explain: Yes No
Organization Contact name Phone		
Organization Contact name Phone		

I hereby certify that

- 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.
- I affirm that the information contained in this application is true and accurate to the best of my knowledge and belief.

**INITIALS REQUIRED**

<b>Signature of applicant</b>	Date
<input type="radio"/> YPT completion certificate attached and Background Check Authorization form attached <b>REQUIRED</b>	

## 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.

All applications should be submitted to the local council within 5 business days.

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.

<b>REQUIRED</b>	Date
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Signature of Chartered Organization Head or representative or council representative

Unit type: ☐ Pack ☐ Troop ☐ Crew ☐ Ship

☐ New leader ☐ Former leader ☐ Position change ☐ Participant

<b>REQUIRED</b>
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Unit No. or District name

<b>REQUIRED</b>
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Scouting Position Code Scouting Position Title

\$	\$	\$
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Registration fee Council fee Scout Life fee

PAID: ☐ Cash ☐ Check No. ☐ Credit card

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.

Signature of Scout Executive or designee	Date
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If applicant has a current registration in another unit or local council, the registration may be completed at no charge by transferring the registration or multiple registering.

Unit No. or District name
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Transferring from Unit/Council:
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☐ Transfer application ☐ Multiple application ☐ Pack ☐ Troop ☐ Crew ☐ Ship

Enter membership number from unexpired registration:
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