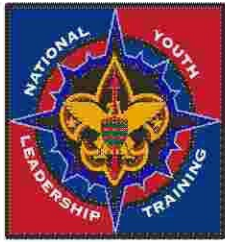


*Boy Scouts of America*  
**National Youth Leadership Training**  
 2010 Participant Application



PLEASE PRINT CLEARLY OR TYPE THE FOLLOWING INFORMATION

<b>Unit</b>	District		Unit #	E-mail	
<b>Name</b>	First	MI	Last	Social Security #	
<b>Address</b>	Street				
	City		State	Zip	
<b>Phone</b>	Home		Business	Cell	
<b>Stats</b>	Date of Birth	Age	Sex	Condition of Health	Physical Limitations
<b>Scouting Experience</b>	Current Scouting Position		Rank	Years in Scouting	

**SCOUT PARTICIPANT AGREEMENT**

I certify that I have attended at least one long term BSA camp or super camp prior to my NYLT experience. While in attendance at NYLT, I promise to live by the Scout Oath and Law/Venture Code and the conditions of the NYLT Code of Conduct. I will do my best to ensure that I and those around me will have an enjoyable experience at NYLT.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SCOUTMASTER/ADVISOR RECOMMENDATION**

I approve this application. I believe the Scout meets all the requirements of participation and is, or will be, a leader in his/her unit who can use the lessons of NYLT to improve the Scouting experience of his/her peers.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PARENT OF GUARDIAN AGREEMENT**

I approve this application. I believe my Scout will be a good citizen while at NYLT. I understand participants need a full scout uniform, personal camping equipment, and transportation to and from this course.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Fee for the course is \$195. A deposit of \$80 will reserve a spot on the course. Please mail or deliver this application with your payment option to:

Sioux Council BSA  
 ATTN: NYLT  
 800 North West Avenue  
 Sioux Falls, SD 57104

Amount paid with this application

\$
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