

National Youth Leadership Training Participant Application Instructions

Course Dates: June 5th (Monday) – June 10th (Sunday), 2017

Twin Bears Camp, MP30 Chena Hot Springs Road, Fairbanks, Alaska

Participants must attend mandatory Opening meeting on June 5th, 2017 and be present for the entire course.

Participants MUST meet the following requirements:

Boy Scouts: Rank of First Class by Opening Meeting on June 5th, 2017 and 13 years old by June 10th, 2017; Scoutmaster's recommendation and signature on the application.

Venturing, Sea Scouts, Varsity: 14 years old by June 10th, 2017; Unit Leader's recommendation & signature on the application. Venturing Youth Protection Training if over 18 years old before June 5th, 2017. Certificate must be turned in with the application.

For more detailed information, please contact the following individuals:

Course Director: Pat DeMeritt, demeritt.patrick@gmail.com or (907) 460-0254

Staff Advisor: Steven Smith, stephen.smith@Scouting.org or (907) 452-1972

Application process

1. Type in and complete the application below. Print the application and have it signed by the Scoutmaster.
2. \$450.00 is payable in full at the Midnight Sun Council Office, 1400 Gillam Way, Fairbanks, Alaska 99701

(DEADLINE TO REGISTER IS MAY 15TH)

\$200.00 NON-REFUNDABLE BUT TRANSFERABLE DEPOSIT AT REGISTRATION

EARLY BIRD SAVINGS OF \$50 IF REGISTERED AND FEES PAID BY APRIL 1ST, 2017

3. Please complete all forms on the NYLT website <http://www.midnightsunbsa.org/programs/council-programs/nylt.html> for NYLT 2017. Illegible, incomplete, or unsigned forms will be returned and participant's registration in the program halted; no spots will be held open while waiting for any paperwork.

4. Acceptance criteria

- ✓ Above requirements met and verified by Administrator
- ✓ Application with paid receipt attached
- ✓ Code of Conduct signed by the Scout and parent (unless the Scout is over 18.)
- ✓ All medical forms submitted with applications, except medical form C which is due no later than June 5th, 2017 at Mandatory Opening Meeting. Please do not ask for exceptions. NYLT orders supplies, reserves medics and must be prepared prior to camp to ensure the safety of your participants and needs the time to prepare. Venturing Youth Protection Training if over 18
- ✓ Attend mandatory Opening meeting. June 5th, 2017.
- ✓ Final acceptance is at the discretion of the course director.

If participant is absent from the Mandatory Downhill Meeting on June 5th, 2017 their application will be withdrawn and no refund will be issued unless they have made a prior arrangement with the Course Director and it has approved.

Applicants whose medical form C is not submitted by June 1st, 2017 will be placed on a wait list.

No spots will be held for incomplete paperwork and there is no guarantee there will be available spots. Wait list priority is based on a first come first received completed paperwork.

Please mail ALL completed, paperwork to: **Midnight Sun Council, BSA, 1400 Gillam Way, Fairbanks, Alaska 99701**

National Youth Leadership Training

Participant Application Section A: Participant Information

Last: _____ MI: _____ First: _____ BSA Membership ID # _____

Preferred Name: _____ (for name badges) Gender: _____

Boy Scouts: Rank: _____ Date of Birth: _____
(Must be 1st Class on 6/05/2017) (Must be 13 by 6/10/2017)

Venturing/Sea Scouts/Varsity:

Date of Birth: _____ Venturing YPT Date of completion: _____
(Must be 14 by 6/10/2017) (if 18 before 6/1/2017) Need copy of certificate with application.

Section B: Parent information

Mother's name: _____ Father's name: _____

Guardian's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Please list other contact information.

Father's Home #: _____ Father's Cell #: _____ Father's Email: _____

Mother's Home #: _____ Mother's Cell #: _____ Mother's Email: _____

Guardian Home #: _____ Guardian Cell #: _____ Guardian Email: _____

Section C: TO BE FILLED OUT BY Unit Leader:

Recommendation is required for participant to attend NYLT. Please fill in ALL the info below.

Present Unit Position: _____ Unit Type (Troop/Crew, etc.): _____

Unit #: _____

District: _____

Council: _____

Unit Leader Phone #: _____

Email: _____

By signing this, you are confirming that this participant meets the requirements to attend NYLT: (e.g., First Class, 13 years old)

Unit Leader Name: _____

Concurrence/Signature: _____

CODE OF CONDUCT

All Youth and Adult participants of National Youth Leadership Training (NYLT) are representatives of the community, family, and local Scouting Council. Therefore, all Scouts and their parents are asked to sign this Code of Conduct as a condition for participating with further understanding, that serious misconduct or infraction of behavior rules may result in expulsion from the NYLT course. We want each Scout to be responsible for their own behavior, and only when necessary will the procedure be invoked to send a Scout home from the NYLT course.

ALL SCOUTS ARE EXPECTED TO LIVE BY THE BOY SCOUT OATH AND LAW AT ALL TIMES AND TO USE THESE IDEALS AS GUIDES FOR THEIR BEHAVIOR.

I promise on my honor as a Scout that I will set a good example by keeping myself neatly dressed and presentable. The Scout Field Uniform or Activity Uniform will be worn at all times as designated by the Course Director.

I will be responsible for keeping my tent and personal gear labeled, clean, and neat.

I will demonstrate respect for Course equipment, public property and will be personally responsible for cleanliness and any loss, breakage, or vandalism of property.

Serious or repetitive behavior violations by scouts including, but not limited to, the possession or use of tobacco, alcohol, cheating, gambling, dishonesty, swearing, fighting, cursing and/or willful disobedient to Youth or Adult Staff may result in the expulsion from the NYLT course.

Possession of any of the following are deemed unsuitable for participants at NYLT and should not be brought to camp: Any type of laser device, pyrotechnic device (fireworks), personal firearm or ammunition, alcohol or tobacco products, controlled substances of any kind, inappropriate literature, electronic gaming devices, personal music or movie players (iPod, MP3 players, CD, DVD players, etc.).

Scout must learn to respect the rights and property of others. Remember to keep your hands to yourself. The tongue is a vicious weapon, please think before you speak. Remember the Golden Rule - "Do Unto Others as You Would Have Them Do Unto You".

I PROMISE ON MY HONOR AS A SCOUT THAT I WILL DO MY BEST TO LIVE UP TO THE SCOUT OATH AND LAW AND AGREE TO FOLLOW THIS CODE OF CONDUCT.

SCOUT SIGNATURE	PRINT NAME	DATE
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PARENT / GUARDIAN SIGNATURE	PRINT NAME	DATE
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PARENT / GUARDIAN
REQUEST FOR MEDICATION (If Needed)

Scout Name: _____ Date of Birth: _____

Patrol: (Determined by NYLT Staff) _____

I request that medication be administered to my son / daughter in accordance with the written prescription on the medication container.

Diagnosis / Reason for Medication:

Medication / Dose:

Route (Oral, Topical, etc.):

Possible Reactions:

Instructions for Emergency Care: (please attach additional page)

PARENT / GUARDIAN PRINTED

NAME PARENT / GUARDIAN SIGNATURE

DATE:

HOME PHONE #

WORK PHONE #

CELL PHONE #

PERMISSION TO CARRY MEDICATION (If Needed)

Inhaler / Medication:

My son / daughter has been instructed in the proper use of their inhaler / medication. Their wellbeing is in jeopardy unless the inhaler / medication is carried on his / her person; therefore, I request that he / she be permitted to carry the inhaler / medication. I permit my son / daughter to carry the above listed inhaler / medication as ordered by his / her physician. I understand that sharing medication with other Scouts will result in disciplinary action. I also understand the NYLT Staff are unable to monitor the frequency or method of usage of inhaler / medication when it is being carried by a Scout.

PARENT / GUARDIAN SIGNATURE

DATE: