



# Boy Scout Troop 439

## Troop Membership Checklist for Scouts

Valid for year: \_\_\_\_\_



Welcome to BSA Troop 439! Please follow and complete all of this checklist carefully. If you are renewing your membership with Troop 439 and your membership documents are already on file with us, avoid the paperwork by checking the 'reuse on file' and sign and date the item in the space provided. Note: All required membership information and forms are available from [www.bsatroop439.com/membership](http://www.bsatroop439.com/membership)

### Scout Form - Please print and complete ALL items 1 - 13

	Name	e-Mail Address	Phone	Troop Verified
<b>1</b>	<b>Scout</b>			
<b>2</b>	<b>Parent/Guardian</b>			
<b>2a</b>	<b>Parent/Guardian</b>			

Check box if this is a New Troop membership – Include an original BSA Youth Application form available from the Troop Membership Coordinator.

		Please ✓ check only one box per line			
	Form Name <i>Click to Download</i>	Instructions for Form	Reuse on file	Parent Check	Troop Verified
<b>3</b>	<b>This form</b>	You must print this form and bring it with you for registering with the Troop.		✓	
<b>4</b>	<a href="#">BSA Medical Part A and B</a>	As per BSA policy, this must be renewed annually to ensure all medical information is up to date. Note: BSA Medical Part C is only required when attending any event over 72 hours.			
<b>5</b>	<b>Copy of Medical Insurance Card</b>	Provide a new copy of both sides, or check 'Reuse on file', verify and sign and date below. <input type="checkbox"/> I confirm my medical insurance card details are still valid and have not changed from that on file. Parent Signature for this membership renewal : _____ Date: _____			
<b>6</b>	<a href="#">BSA Activity Consent Form and Approval by Parents or Legal Guardians.</a>	As per BSA policy, this must be renewed annually. It is recommended that you state that your scout can participate in "All Troop 439 Activities"  <i>Reminder: Your scout signature is also required on this form</i>			
<b>7</b>	<a href="#">Youth Troop 439 Travel Policy</a>	Provide a new form, or check 'Reuse on file', verify and sign and date below. <input type="checkbox"/> I confirm that I have re-read and agree to the Travel Policy for this renewal period. Parent Signature for membership renewal : _____ Date: _____			
<b>8</b>	<a href="#">Youth Troop 439 Permission and Waiver of Liability</a>	Provide new form, or check 'Reuse on file', verify and sign and date below. <input type="checkbox"/> I confirm that I have re-read and agree to the Permission and Liability for this renewal period. Parent Signature for membership renewal : _____ Date: _____			
<b>9</b>	<a href="#">Youth Troop 439 Code of Conduct and Discipline Policy</a>	Please read (even if you are familiar with the policy). Please provide a printed copy of the <b>signature page 5 only</b> or check 'Reuse on file', verify and sign and date below. <input type="checkbox"/> Parent - I confirm I have re-read and agree to the Code of Conduct and Discipline Policy Parent Signature for membership renewal : _____ Date: _____ <input type="checkbox"/> Scout - I confirm I have re-read and agree to the Code of Conduct and Discipline Policy Scout Signature for membership renewal : _____ Date: _____			
<b>10</b>	<a href="#">Class B Shirt options</a>	Please choose your included regular Class B shirt by circling your choice below: <i>Sleeve Type: Short  or  Long      Adult Size: XS S M L XL XXL</i>  Check this box to order additional shirts <input type="checkbox"/> Please attach special order form			
<b>11</b>	<b>Boys Life Magazine</b>	<input type="checkbox"/> I would like to include Boys Life Magazine at an additional \$12 (recommended)			
<b>12</b>	<b>\$ Membership Dues</b>	Annual Membership cost is \$150 (prorated) + Optional Boys Life + Optional Other Shirts <input type="checkbox"/> Check for Scout Sibling Discount of \$25, Primary Scout Name _____ Please make checks payable to <b>BSA Troop 439</b> .  <input type="checkbox"/> Check Number _____ Total Paid Amount \$ _____ <input type="checkbox"/> Cash \$ _____			
<b>13</b>	<b>Retain Copy</b>	Please retain a copy of this completed form for your records			

**File Review (Troop 439 use only)**

Reviewer: \_\_\_\_\_

Notes: \_\_\_\_\_

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

Complete? Yes / No