## YOUTH PARTICIPANT

○ Exploring Post ○ Explorer Club Number:

If applicant has an unexpired participant certificate, participation may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.

○ Transfer application Transfer from council no.: ○ Exploring Post ○ Explorer Club Number:

*Name and address information* **(Please print one letter in each space—press hard, you are making a copy.)**

First name **(No initials or nicknames)** Middle name Last name Suffix

Country Mailing address City State Zip code

US

Phone - - Date of birth (mm/dd/yyyy) / / Grade

Ethnic background:
○ Black/African American ○ Native American ○ Alaska Native ○ Asian
○ Caucasian/White ○ Hispanic/Latino ○ Pacific Islander ○ Other

School

Gender: ○ Male ○ Female

Email address (Post youth participant only) @

*Parent/guardian information*

Select relationship: ○ Parent ○ Guardian ○ Grandparent ○ Other (specify)

First name **(No initials or nicknames)** Middle name Last name Suffix

Country Mailing address City State Zip code

US

Home phone - - Date of birth (mm/dd/yyyy) / / Occupation Employer Gender: ○ M ○ F

Business phone - - X Ext. Previous Exploring experience Cell phone - -

Parent/guardian email address @

I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).

Signature of post or club leader Date / /

Signature of parent/guardian

Participation fee $ . Paid: ☐ Cash ☐ Check No. _____ ☐ Credit card

Signature of Explorer

LOCAL OFFICE COPY

524-009

Retain on file for three years.