

# AQUILA SCOUT TROOP INFORMATION FORM

Please consult the "Information for Parents of New Scouts" and in particular the section, "Notes about the Forms" for further guidance. Use the back of the page, if you run out of room.

<b>GENERAL INFORMATION.</b> Please fill out each box, even if there is some overlap with the Group Membership Form: the Troop does not keep that.	
Member's name (forename used + surname)	
Full forenames	
Gender	
Scout's E-mail address (See notes)	
Religion and place of worship	
Any special needs: physical, educational, allergies etc.	
Any other information about your son or daughter that the Troop should know	
<i>Information from the Troop.</i> Please tick this box, if you are UNABLE to take only email notifications of letters and we need to send paper versions. (See notes)	

<b>PREVIOUS SECTIONS</b> Please list all previous sections in the 18th or another Scout Group, together with length of time in each.		
	Section name (in 18th or Group name (another Group))	Length of time (years and months)
Beavers		
Cubs		
Scouts		

<b>NIGHTS AWAY</b> Please list Camps and other Nights Away activities before joining the Troop.		
<b>Camp location</b>	<b>Date</b> (year will do)	<b>Number of nights</b>

<b>PERMISSIONS</b> Please delete phrases in bold as appropriate.	
<i>Troop Photos</i> (see Notes for fuller explanation) I <b>do/do not</b> give permission for photographs to be taken of my child for Scouting purposes.	
I <b>do/do not</b> give permission for photos of my son or daughter, taken on Scouting activities, to be included in this DVD/CD and any similar, future presentations, as described above.	
I agree not to copy, modify, distribute or post on a web site any of the content of such presentations. ( <b>Cross out, if you do not agree</b> )	
<i>Membership Records.</i> I accept that the Scout Troop will keep information about my son's/daughter's membership for Scouting purposes. I give explicit consent to the holding of information of my son's/daughter's health, special needs, and faith for Scouting purposes. (See Notes for fuller explanation)	
I give permission for my son/daughter to be a member of Aquila Scout Troop and I have read and accept the information in the Membership Pack.	
Signed (parent/guardian: _____)	Date: _____