

ADULT IN CAMP STATE COMPLIANCE FORM

To be completed by each adult attending camp and submitted to the camp administration

Name: _____
 First Middle Last

Birth Date: _____ mm/dd/yyyy
Unit: _____ District: _____

Type and Number

Council: _____

The Following questions are required by the State of Texas Youth Camp Safety Act and must be completed to attend a Texas Youth Camp.

Scouting Background (position, council, year): _____

Experience Working with Youth in other organizations: _____

Previous Residences (last 5 years): _____

Current Memberships (religious, community, business, labor, or professional): _____

References. Please list those who are familiar with your character as it relates to working with youth. References will be checked when necessary.

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Additional Information. Mark each answer Yes or No.

Do you use illegal drugs? ___ YES ___ NO

Have you ever been convicted of a criminal offense? ___ YES ___ NO

Have you ever been charged with child neglect or abuse? ___ YES ___ NO

Have your Driver's License ever been suspended or revoked ___ YES ___ NO

Other than the information above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of young people?
 ___ YES ___ NO

A criminal background check is required by the State of Texas within 90 days of camp and will be conducted by the Circle Ten Council. I agree to this background check to be eligible to attend this camp.

Signature: _____

Date: _____