

## *Buffalo Trail Council Camps Adult Leader Application for Participation*

This form must be filled out *completely* and legibly. Please print and use blue or black ink.

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Sex: \_\_\_\_\_

**1. Are you registered with the Boy Scouts of America? \_\_\_\_\_ Yes \_\_\_\_\_ NO**

If no, you must complete the registration process **before** attending camp. All participants must attach a copy of their registration card or an official BSA copy of the unit roster showing their name as a registered member of that unit.

**2. Have you ever been convicted of a felony or misdemeanor? (You may answer NO if your conviction was ordered sealed, expunged or eradicated)  
\_\_\_\_\_ Yes \_\_\_\_\_ No**

Conviction of a crime is not an automatic bar to participation. All circumstances will be considered, including what you were convicted of and how long ago. You must provide complete information about any conviction by attaching a separate statement.

**3. Have you completed the BSA Online Youth Protection Training course within the last 24 months? \_\_\_\_\_ Yes \_\_\_\_\_ NO (Must be completed bi-annually!)**

If NO, you MUST complete this course and attach a copy of the certification card provided upon successful completion of the training. Training may be completed in the "Training" section of the Buffalo Trail Council website at: [www.buffalotrailbsa.org](http://www.buffalotrailbsa.org)

If you have already completed the course, please attach the copy of the card to this form.

**4. Personal information provided at the top of the form will be used to conduct a search in the Sex Offender Registration database.**

You may conduct the search yourself, or it can be assigned to a leader in the unit to conduct all checks for participating adults. Searches are done by going to this address: [https://records.txdps.state.tx.us/DPS WEB/Portal/index.aspx](https://records.txdps.state.tx.us/DPS_WEB/Portal/index.aspx)

A copy of the results, whether positive or negative, **MUST** be attached to this form.

By signing this form, I swear that the information provided and attached is true and not falsified in any way. I also acknowledge that the personal information provided may be used to conduct a background check and a search in the Sex Offender Registration database.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_