

## BANSTEAD DISTRICT SCOUTS

APPLICATION FOR MEMBERSHIP OF -

**3<sup>rd</sup> BANSTEAD SCOUT GROUP**



|  |
|--|
| APPLICANT'S FULL NAME.....                                 |
| ADDRESS .....<br>.....                                     |
| POST CODE..... TELEPHONE NUMBER .....                      |
| DATE OF BIRTH..... RELIGION .....                          |
| EMAIL .....  |
| SCHOOL .....   |
| ANY PREVIOUS SCOUTING/GUIDING .....                        |
| ANY SPECIAL MEDICAL OR DIETARY REQUIREMENTS .....<br>..... |
| ANY OTHER RELEVANT INFORMATION .....<br>.....              |

|   | <u>MOTHER / CARER</u> | <u>FATHER / CARER</u> |
|---|-----------------------|-----------------------|
| FULL NAME   |                       |                       |
| FORMER NAME`  |                       |                       |
| ADDRESS<br>(including Post Code)                      |                       |                       |
| PREVIOUS ADDRESS<br>(If lived above less than 10 yrs) |                       |                       |
| TELEPHONE NO  |                       |                       |
| MOBILE NO   |                       |                       |
| EMAIL ADDRESS   |                       |                       |
| OCCUPATION  |                       |                       |
| DATE OF BIRTH   |                       |                       |
| ANY PREVIOUS SCOUTING/GUIDING                         |                       |                       |

**Can you help with any of the following? (Please tick any that apply)**

|   |                          |
|---|--------------------------|
| I would be willing to assist the Group by becoming a Leader.  | <input type="checkbox"/> |
| I would be willing to assist the Group by becoming an Occasional Helper,  | <input type="checkbox"/> |
| I would be willing to assist the Group by becoming a Skills Instructor. (Possession of specific skills, to be called on when required.) | <input type="checkbox"/> |
| I would be willing to go on a parent rota to assist my child's section.   | <input type="checkbox"/> |
| I would be willing to assist the Group by becoming a member of the Group Executive Committee.   | <input type="checkbox"/> |
| I would be willing to assist the Group by helping at Jumble Sales and other fund-raising activities.                                    | <input type="checkbox"/> |
| I would be willing to assist the Group by helping with building or grounds maintenance. (No qualifications required.)                   | <input type="checkbox"/> |
| I would be willing to assist the Group by helping with vehicle or equipment maintenance. (No qualifications required.)                  | <input type="checkbox"/> |
| I would be willing to assist the Group by driving members to and from activities held outside Scout Ridge.                              | <input type="checkbox"/> |
| I have the following special skills and qualifications with which I would be willing to assist the Group when required .....            |                          |
| I would prefer to help the Group by .....   |                          |
| .....   |                          |

I give permission for my son/daughter to be in photographs taken at Group or Section activities that may be used in Scouting publicity, provided names are not published.

I accept my responsibility in the running of the Group by agreeing to support the leaders in all they do for the benefit of the members.

I will also accept my responsibility in the running of the Group by paying the annual membership subscriptions and other fees, when requested.

I will support all Group activities, both Scouting and fund-raising, and will assist in maintaining Group premises and equipment.

Data Protection: As a registered Data Controller, 3<sup>rd</sup> Banstead Scout Group is committed to the Data Principles of the Data Protection Act 1998.

By signing this application, I agree to the Group, during and beyond my child's membership:

- retaining my personal data and that of my child to facilitate any present or potential future involvement with Scouting:

- retaining sensitive personal data regarding religion and/or special needs/disabilities.

Signed ..... Signed .....  
(Mother / female carer) (Father / male carer)

Date ..... Date .....

When fully completed, please return this form to Mary Butler, 34 Garrard Rd, SM7 2ER for the applicant's name to be placed on the Group Waiting List or for the applicant to join the appropriate Section.