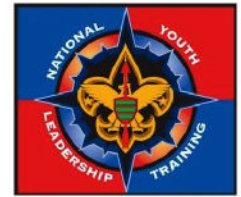




# Participant Application



2008 National Youth Leadership Training  
Georgia-Carolina Council  
Boy Scouts of America  
1450 Green Street, Suite 150  
Augusta, Georgia 30901

The Georgia-Carolina Council is pleased to announce our annual National Youth Leadership Training (NYLT) course. This six-day outdoor leadership experience is scheduled for July 6<sup>th</sup> through July 13<sup>th</sup> 2008 at Knox Scout Reservation.

**What is NYLT?** NYLT is an exciting, action-packed program designed to provide youth members of the Boy Scouts of America with leadership skills and outdoor experiences that they can use in situations demanding self-discipline and leadership of others. NYLT graduates will return to their home units with renewed enthusiasm and greater understanding of how boy led units operate.

The course is intended for scouts that have mastered the basics of scoutcraft and are currently holding, or aspiring to, senior positions within their home unit; therefore, NYLT participants must be thirteen (13) and hold the rank of first class by July 1<sup>st</sup> 2008. There will be no exception granted to these minimum requirements.

The cost for this week long leadership experience is \$180.00, paid in full at the Council office by May 26<sup>th</sup> 2008. Completed participant applications and class two physical must accompany your final payment. Scoutmaster recommendations are to be forwarded directly to the course director. Space will be limited to the first 48 paid participants.

**NYLT is not** designed simply to re-motivates scouts. The course will not help scouts lacking in Scout Spirit or Scouts who have no interest or aspirations of becoming a contributing member of their unit's core leadership.

Additional information to include an equipment list, participant survey, and course content, will be mailed (or emailed) to participants in mid May.

First Name and MI: \_\_\_\_\_ Last: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Religious Pref.: \_\_\_\_\_ T-shirt: S M L XL XXL

Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_ School: \_\_\_\_\_

**Council Use Only** - Fee Paid: \_\_\_\_\_ Rcvd by: \_\_\_\_\_ Age verification: \_\_\_\_\_ Rank Verification: \_\_\_\_\_

Participant Application: \_\_\_\_\_ Scoutmaster Recommendation: \_\_\_\_\_ Orientation Pkg: \_\_\_\_\_

Patrol Assignment: \_\_\_\_\_ Medical or Dietary Restrictions: \_\_\_\_\_

First Name and MI: \_\_\_\_\_ Last: \_\_\_\_\_ Nickname: \_\_\_\_\_

Sports, school, church, and community activities involved in: \_\_\_\_\_  
\_\_\_\_\_

Hobbies and other interests: \_\_\_\_\_  
\_\_\_\_\_

I have the following religious and medical restrictions: \_\_\_\_\_  
\_\_\_\_\_

**Tell us about your Scouting activities:**

Council: \_\_\_\_\_ District: \_\_\_\_\_ Unit: \_\_\_\_\_

Current Leadership Position: \_\_\_\_\_ Current Rank: \_\_\_\_\_ Date of Rank: \_\_\_\_\_

OA (circle one): Ordeal / Brotherhood / Vigil Lodge Leadership Positions: \_\_\_\_\_

All previous Scouting Leadership Positions held in your home Unit for a period of at least six months:  
\_\_\_\_\_

List Scouting Awards, Honors, and Training: \_\_\_\_\_  
\_\_\_\_\_

Summer camp, High Adventure Bases, and Jamborees attended: \_\_\_\_\_  
\_\_\_\_\_

## **Applicants Agreement**

As a participant of the Georgia-Carolina NYLT course, I promise on my honor as a Scout, that I will faithfully live according to the Scout Oath and Law at all times. I will represent my home unit and the Georgia-Carolina Council with honor and set an example to other participants in proper uniform attire, and attitude throughout the course. I understand that the uniform for all NYLT events will be a complete official Boy Scout "Class A" uniform (shirt, trousers or shorts, belt, and socks). I will have a "Class B" uniform available as well.

My parents have reviewed this application and fully support my participation in this learning experience. I will arrange to obtain a Class 2 physical examination that is valid through August 1<sup>st</sup>, 2008 and provide a copy to the Council office with my final payment.

\_\_\_\_\_  
Applicants Signature / Date

\_\_\_\_\_  
Parent (guardian) Signature / Date