ADULT IN CAMP STATE COMPLIANCE FORM

Name:First Middle Last	Birth date: _ (SSN:	
	City:ST:ZIP:		
Unit:Type & Number	District:	Council:	
Which Camp are You Attending?			
The following questions are required by a Texas Youth Camp.	the Texas Youth Camp Compliance	e Safety Act and must t	e completed to attend
Scouting background: (Position, Council, Year)			The same of the sa
Experience working with youth in other organization	ons:)		
			ye (100 - 10
Previous Residences (last 5 years):)			
St.			
0 - 14 - 1 - 1 - 1 - 1			
Current Memberships (religious, community, busin	less, labor, or professional):		
References: Please list those who are familiar with	h your character as it relates to working with	youth. References will be ch	ecked when necessary.
Name:	Ph	ione:	
Name:	Ph	ione:	
Name:	Ph	ione:	
Additional information: Mark each answ	er Yes or No.		
Do you use illegal drugs? Yes N	No		
Have you ever been convicted of a crimi	inal offense? Yes* No		
Have you ever been charged with child r	neglect or abuse? Yes No		
Has your driver's license ever been susp	pended or revoked? Yes* 1	No	
Other than the information above, is ther questions your being entrusted with the	re any fact or circumstance involvin supervision, guidance, and care of	g you or your backgrou young people? Yes	nd that would call into
* For items marked yes, attach a letter o	f explanation.		
A criminal back ground check is required Area Council. I agree to this background			conducted by the Bay

Signature: ______ Date: _____