



San Francisco Bay Area Council  
Boy Scouts of America

**SFBAC-NYLT**  
**Individual Participant Approval**  
<http://www.sfbac-nylt.org>  
[info@sfbac-nylt.org](mailto:info@sfbac-nylt.org)



*PLEASE PRINT NEATLY or FILL OUT IN on Acrobat Reader and then print –  
Don't forget that you need to register on-line and have all three signatures on this page, and the  
paperwork received by Council before registration is complete.*

Name (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Troop/Crew # \_\_\_\_\_ District \_\_\_\_\_ Council (if not SFBAC) : \_\_\_\_\_

Birthdate \_\_\_/\_\_\_/\_\_\_ Rank (if Scout) \_\_\_\_\_ E-mail: \_\_\_\_\_

Scoutmaster's or Advisor's Name \_\_\_\_\_

Scoutmaster's or Advisor's E-mail \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**Participant Agreement and Parent Approval:**

I recognize that by participating in SFBAC-NYLT, I incur a leadership responsibility in my Troop/Crew during the coming year. I will endeavor to "do my best" to discharge this responsibility by giving effective leadership to Scouts and the Youth Leaders in my Unit.

Further, I do intend to adhere to the NYLT [Code of Conduct](#).  (Check to indicate that you have read the Code.)

(Signed) \_\_\_\_\_ (Approved) \_\_\_\_\_  
Participant Parent/Guardian

**Leader's Recommendation:**

I recommend the above participant for SFBAC-NYLT and will assist him/her in applying the leadership principles in our Unit.

(Signed) \_\_\_\_\_  
Scoutmaster/Advisor

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Return this approval form to:

SFBAC-NYLT Registration  
**Boy Scouts of America- SFBAC**  
1001 Davis St.  
San Leandro, CA 94577