



New Lynn Sea Scouts

Keas ~ Cubs ~ Scouts ~ Venturers ~ Rovers

FULL NAME - CHILD

ADDRESS.....

HOME PHONE MOB

DATE OF BIRTH email address.....

MEDICAL (asthma etc)

PREVIOUS SERVICE IN SCOUTS

Parental Details:

MOTHER Full Name

Occupation

FATHER Full Name.....

Occupation

I/we have skills in the field of, for example (building, painting, electrical, plumbing, landscaping, welding, etc)

Our/My skill is/are I am prepared to donate
..... hours to the scout group per term / year.

We/I do not have any specific skills but would be happy to go onto a cleaning roster, help with fundraising, tow boats or wherever I can help.

We are not asking you to commit a lot of time. If everyone does something, we may only require your help once or twice a term.

We/I do not have the time or for some other reason are not able to help in any way and would rather pay an extra \$100.00 a year towards maintenance.

Please add this money to my fee invoice.....

Declaration:

I am willing that.....should become a member of the New Lynn Scout Group. I will help him/her live up to the Kea, Cub, Scout or Venturer Promise and will actively support the group.

Signed

Date