

**CLUBS:** For young men and women in sixth, seventh, and eighth grades who have completed the fifth grade and are at least 10 years old but have not completed the eighth grade and are not yet 15 years old.

**POSTS:** For young men and women who are at least 14 (and have completed the eighth grade) or 15 years of age but not yet 21 years old.

## YOUTH APPLICATION

Exploring is based on a unique and dynamic relationship between youth and the organizations in their communities. Local community organizations initiate a specific Explorer post or club by matching their people and program resources to the interests of young people in the community. The result is a program of activities that helps youth pursue their special interests, grow, and develop.

Explorer posts/clubs can specialize in a variety of career skills. Exploring programs are based upon five areas of emphasis: career opportunities, life skills, citizenship, character education, and leadership experience.



			Cut along dotted line.
Tips for completing the Application for Exploring Youth Participant:	Partice Term per month	cipant Chart  Youth/adult participant fee	r
➤Print—do not use cursive.	1	2.75	TEMPORARY PARTICIPANT CERTIFICATE (Good for 60 days)
➤Use black or dark blue ink.	2 3	5.50 8.25	This certifies that
➤ Press firmly when printing.	4 5	11.00 13.75	
>Print one letter only in each box.	6	16.50	
> Use uppercase letters and stay within the blue boxes for legibility.	7 8	19.25 22.00	ı is a member of
<ul><li>➤ Fill in circles; do not use check marks.</li><li>➤ Make sure you have all needed signatures on application.</li></ul>	9 10	24.75 27.50	Destructive land a signature
➤ Don't alter the application—it could affect the quality of the scan.	11	30.25	Post or club leader signature
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Parent/guardian email address  Make sure you have all	needed	<del></del>	
D E B O R A H . S M I T H @ signatures on application			
			I have read the attached information sheet and approve the application
Dill Taylor		2 0 1 6	I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).
Bill Taylor  Date	/ 1 3 7 2	2 0 1 6	Deborah Sue Smith
Signature of post or club leader			Signature or parent/guardian
	ı		* Kathy Smith
Participation fee \$ Paid: Cash Ch	eck No	Credit card	Signature of Explorer

YOUTH PARTICIPANT		O Exploring Post	O Explorer Club
If applicant has an unexpired participar	nt certificate, participation may be accomplished at no charge by transferring the registration. N	Mark and attach a copy of the certifi	cate.
Transfer application	Transfer from council no.:	C Exploring Post	O Explorer Club

If applicant has an unexpired participan	it certificate, participation may	y be accomplished at no char	rge by transferring the registration	. Mark and attach a copy of the certificate.	
Transfer application	Transfer from council no.:			C Exploring Post C Ex	plorer Club Number:
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Signature of post or club leader		Date		Signature of parent/guardian	
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Number:

YOUTH PARTICIPANT	O Exploring Post	O Explorer Club	Number:	_
If applicant has an unexpired participant certificate, participation may be accomplished at no charge by transferring the registration. Mark and attach a copy of the certificate.				

PARTICIPANT				
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School			Caucasian/White Hispanic/Latino	O Pacific Islander O Other
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Email address (Post youth participant only)				
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Parent/guardian information	_	_		
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	/ [		(signature or parent/guardian required if applic	cant is under 16 years of age).
Signature of post or club leader	L L Date			
Signature of post of Gub leader			Signature of parent/guardian	
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Participation fee \$ ·	Paid: Cash Check N	No Credit card	Signature of Explorer	

YOUTH PARTICIPANT					O Exploring Post	O Explorer Club	Number:	
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	O Black/African American O Native American O Alaska Native O Asian
School	Caucasian/White Hispanic/Latino Pacific Islander Other
	Gender: O Male O Female
Email address (Post youth participant only)	
	Gender: O Male O Female  O Other (specify)
Parent/guardian information	
Select relationship: O Parent O Guardian O Grandparent	Other (specify)
First name (No initials or nicknames)  Middle name  Las	st name Suffix
Country Mailing address City	State Zip code
Home phone Date of birth (mm/dd/yyyy) Occupation	Employer Gender: g
	Employer Gender: 60 M 64 M
Business phone Ext. Previous Exploring experience	Cell phone
Parent/guardian email address	++++++++++++++++++++++++++++++++++++++
	I have read the attached information sheet and approve the application (signature of parent/guardian required if applicant is under 18 years of age).
Signature of post or club leader Date	Signature of parent/guardian
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Participation fee Paid: Cash Check No. Credit card Signature of Explorer