

Bigfoot Lodge Transfer or Reinstatement

Name _____ Unit Type: Troop Crew
Address _____ Unit Number: _____
City _____ State _____ Zip Code _____ District: _____
Phone: _____ Member's Email: _____
Current Role(s) in Scouting: _____
Occupation: _____ Company/Organization: _____

Talents		
Accounting	Artwork	Carpentry
Computers	Concrete	Electrical
Engineering	Excavation	Fundraisng
Marketing	Masonry	Retail
Restaurant	Musician	Plumbing
Theater	Web Design	
Other: _____		

Certification
BSA Aquatics Supervisor
BSA Paddlecraft Safety
BSA Range Safety Officer
BSA Range Master
Class Drivers License
COPE/Climbing
ATV Safety Institute Instructor

Birthdate: _____

**> Required for 18+
Date of Youth Protection
Training: _____
(month/date/year)**

Are you a heavy equipment operator? _____ Do you have a commercial driver license? !! Yes No
Do you own any heavy equipment? If so, what? _____

Ordeal Awarded Date: _____ Lodge: _____
Brotherhood Awarded Date: _____ Lodge: _____
Vigil Awarded Date: _____ Lodge: _____ Vigil Name: _____

As stated in OA's Guide for Officers and Advisers, adult participation is based upon the adult's willingness to perform the necessary functions to help the Order fulfill its purpose. Adult Scouters must be an asset to the Order because of demonstrated abilities, and must be positive role models for the youth members of the lodge. Additionally, a qualified adult member should have a position in Scouting that will make membership in the lodge more meaningful in the lives of the youth membership.

Adult members are expected to perform tasks such as serving as OA Troop Adviser, giving youth members rides to/from OA events, assisting with planning OA service projects in local communities, coordinating an event or service project at conferences, guiding youth with camp promotions and elections and more.

As an Adult Member of the Lodge, I will:

- Perform the necessary functions to help the Lodge fulfill its purpose;
- Be a positive role model for youth members of the lodge;
- Work to make membership in the lodge more meaningful in the lives of youth of youth membership; and,
- Maintain a current Youth Protection Training status

Applicant Signature

Date

I am transferring from (Name) _____ # _____
Council Name _____ # _____
Address _____
City _____ State _____ Zip _____

Office Use Only

Supreme Chief of the Fire Approval: _____