


Membership Details Form

Please complete this form for each young person, and return to your Section Leader. Additional copies of the form are available by request.

MEMBER DETAILS				
Full Name				
Date of Birth	(DD/MM/YYYY)	Gender		
Section	<input type="checkbox"/> Beavers	<input type="checkbox"/> Cubs	<input type="checkbox"/> Scouts	(please tick)
CONTACT DETAILS				
	Primary	Secondary		
Name of Parent/Guardian				
Address				
Postcode				
Home Telephone				
Mobile Telephone				
Email (please print)				
MEDICAL DETAILS				
Doctor's Surgery				
Address				
Telephone				
Does your young person have any medical / dietary restrictions / other special needs?				<input type="checkbox"/> No <input type="checkbox"/> Yes (please describe below)
BACKGROUND				
School				
Ethnicity				(see options below)
Religion or Faith				(see options below)
Any additional information that we should know?	Please provide full details on a separate sheet of paper and discuss with the leaders.			
Ethnicity: White: British, Irish, Gypsy, Irish Traveller, Other; Mixed/Multiple: White/Black Caribbean, White/Black African, White/Asian, Other; Asian/Asian British: Indian, Pakistani, Bangladeshi, Chinese, Other; Black/African/Caribbean/Black British: African, Caribbean, Other; Other: Arab, Other; Prefer not to say.				
Religion or Faith: Buddhist, Christian (all denominations), Hindu, Jewish, Muslim, Sikh, Other, No Religion, Prefer not to say.				
Data Protection				
<p>I accept that the Scout Group will be keeping information about my child's membership of The Scout Association (see Welcome Pack for details).</p> <p>I accept that this information will only be used for Scouting purposes.</p> <p>I accept that my email address will be used and shared with other members in the Scouting hierarchy to enable activities to be arranged and facilitate communication within the Group.</p> <p>I accept that images of my child may be taken and used only for Scouting purposes.</p>			(signature of parent/guardian and date)	
			(relationship to member)	
GIFT AID DECLARATION				
<input type="checkbox"/> I would like the Scout Group to treat all payments I make on or after 4 years prior to the date of signature in respect to the member subscriptions and donations for the Group as Gift Aid donations.				
Notes				
<ul style="list-style-type: none"> • You must be a tax payer and pay an amount of income tax or capital gains tax at least equal to the amount we reclaim on the payments (currently 25p for every £1 you give) • You can cancel this declaration at any time by notifying the Scout Group Treasurer • Please notify the Scout Group if you change your name or address • Note that cheques to the Group must be written by the person signing above 				