

Please fill in this form when your child/ward moves to a new age section as well, to ensure our information is up to date and to remind you of the disclaimer.

I want my child/ward+ to join Scout Group in Province.

My child/ward would like to join: 5-6 year olds (Meerkats) 7-10 year olds (Cubs) 11-17 year olds (Scouts)

DETAILS OF PARENTS/LEGAL GUARDIANS OF APPLICANT: (Items marked with an asterisk * are required)

***PARENT/LEGAL GUARDIAN ONE:**

*Full Name & Surname:
 (as per ID)

*Title (Mr/ Ms/ Miss/Dr/Prof/Rev): *Gender Male Female Non-binary

*Cell No:
 (We must have your cell phone number to communicate with you and for emergencies)

Email Address:
 (This is optional but is very helpful for us to communicate with you and for emergencies)

*Residential Address:
 (We need this to be able to take your ward home in case of emergencies)

Postal Code:

Marital status: Occupation:
 (This is optional, but helps with clear communication, for example divorced parents may not be communicating)

*Relationship to child/ward:
 (Mother, Father, Grandparent, Stepparent, Legal Guardian...)

Do you have a skill/profession that you are prepared offer pro bono, on request, to Scouting:

PARENT/LEGAL GUARDIAN TWO (*required if there is a second guardian)

*Full Name & Surname:
 (as per ID)

*Title (Mr/ Ms/ Miss/Dr/Prof/Rev): *Gender Male Female Non-binary

*Cell No:
 (We must have your cell phone number to communicate with you and for emergencies)

Email Address:
 (This is optional but is very helpful for us to communicate with you and for emergencies)

*Residential Address:
 (We must have this to know how to be able to take your ward home in emergencies)

Postal Code:

Marital status: Occupation:
 (This is optional, but helps with clear communication, for example divorced parents may not be communicating)

*Relationship to child/ward:
 (i.e., Mother, Father, Grand parent, Step parent)

Do you have a skill/profession that you are prepared offer pro bono, on request, to Scouting:

DETAILS OF YOUTH APPLICANT:

(Items marked with an asterisk * are required)

*Full Name & Surname:

(as per Birth certificate)

*Gender

Male

Female

Non-binary

Name known by: (Nickname)

*Identity Number:

*Date of Birth:

Cell No:

(We only ask for your cell phone number if you are older than 14 years to communicate with you)

Email Address of child:

(This is optional but is very helpful for us to communicate. We only ask this if you are older than 14 years.)

With which parent does the child/ward reside?

Both parents

Parent One

Parent Two

Home Language:

(Optional, but it helps us communicate with you)

Other Languages the child/ward speaks:

In case of an emergency where you need medical treatment, we need your medical aid details:

(Optional, but it makes it more likely that your child/ward will get better medical treatment in an emergency so please provide if you can)

Medical Aid Scheme Name (e.g.: Discovery)	Medical Aid Number	Principal Member
<input type="text"/>	<input type="text"/>	<input type="text"/>

*Medical conditions (like allergies) we should be aware of (If none, please write 'none'):

Religion: (The answer is optional. If you provide this information, it helps us in many ways, such as catering requirements)

Buddhist:

Christian:

Hindu:

Jewish:

Muslim:

Other:

Choose not to disclose:

Ethnic Group: (This information is optional and only used to report general demographic statistics for funding and BBBEE purposes. SCOUTS South Africa does not identify the race of specific individuals to third parties.)

African:

Asian:

Caucasian:

Coloured:

Indian:

Other:

+Ward: A ward is a person, especially a minor, who has been legally placed under the care of a guardian or a court.

FOR OFFICE USE

Date captured on SSA Membership database:

Unique SD Number:

If this form is not captured on the SSA membership database, the Scout Group needs to keep the forms in a locked cabinet at the Scout meeting place.

I/we (full name) parent(s)/legal guardian(s) of (child's/ward's full name) apply for membership at SCOUTS South Africa.

1. I understand that the youth programme is an active one, which includes opportunities for adventure, service and fun.
2. I undertake to provide my child/ward with the required uniform (as stipulated by the Group), I will ensure that my child/ward attends meetings regularly and I will pay the required membership fee as presented at the AGM annually.
3. I am aware of the Child Protection Policy of SCOUTS South Africa, which aims to safeguard the welfare of all members by protecting them from emotional, physical and sexual harm.
4. I confirm that I have read, am familiar with, and understand the contents of the Safe Scouting Policy.
5. I consent to SCOUTS South Africa processing any personal information I supply to them for administrating and maintaining my child/ward's membership of SCOUTS South Africa. I confirm that my personal details and that of my child/ward may be uploaded to the SCOUTS South Africa Membership database and internal communication platform(s). **I have read the [SCOUTS South Africa Privacy Notice](#) which sets out what my personal information will be used for and who it will be shared with.**
6. I acknowledge that anyone entering the premises of SCOUTS South Africa does so entirely at their own risk. Except to the extent that the loss or damage is covered by SCOUTS South Africa's Public Liability insurance, SCOUTS South Africa does not accept responsibility and I accept that it will not be liable for any loss of or any damage of any kind or any death of or injury to any person (including my child/ward) whilst participating in any activities organised by or conducted by SCOUTS South Africa, even if such loss or death or injury is caused by the negligent act or omission of SCOUTS South Africa, its employees, agents, officers, contractors, affiliates or any other person.
7. I hereby indemnify and hold harmless SCOUTS South Africa against all or any claims which may be made against SCOUTS South Africa or its employees, agents, officers, contractors, affiliates or any other person, by any person (including my child/ward) for any damages of whatever kind arising from the death or injury to such person whilst such person is or on any premises of SCOUTS South Africa or participating in any activity organised by SCOUTS South Africa if the injury or harm was caused by me or my child/ward.
8. Except to the extent that the loss or damage is covered by SCOUTS South Africa's Public Liability insurance, I am aware that SCOUTS South Africa accepts no responsibility for any loss, injury or damage that the person or property of my child/ward may sustain whilst engaged in any Scouting activity and I waive any right that I or my child/ward may have to claim compensation against SCOUTS South Africa or other members in respect of any loss, injury or damage incurred whilst engaged in any Scouting activity howsoever arising and whether as a result of negligence or otherwise.
9. SCOUTS South Africa holds public liability insurance, but not personal injury insurance.

Use of photographs and audio/audio-visual recordings

SCOUTS South Africa has a legitimate interest to take and use photographs, or film and record audio/audio-visual clips at large public events and during Scout Group meetings, and will not ask for consent. Photographs that include 2 or more people in a public place or Scout venue, will be considered to be 'public' photographs. Unless you have already provided your consent (see below) we will ask for your verbal consent if: the photograph/audio-visual recording is of only your child/ward or it contains special personal information (like information about their health but excluding facial recognition). You can ask us to delete the photograph at any time by using the process set out in our [SCOUTS South Africa Privacy Notice](#), and we will delete the content or tell you why we did not delete it.

CONSENT

I **consent and authorise** that any photo's, statements, audio-visual recordings, video and sound bites taken, recorded, and collected from my child/ward during activities with SCOUTS South Africa may be used free of charge and at the discretion of SCOUTS South Africa as part of their marketing, communication, and fundraising campaigns.
(You do not have to provide this consent, but by ticking the consent box you are helping SSA with fundraising, marketing, and communications. You can withdraw your consent at any time.)

I do **NOT CONSENT** to the above regarding the use of photographs and audio/audio-visual recordings of my child/ward.

I undertake the responsibility to inform the Scouter of this decision.

*Signature of Parent 1/Legal Guardian:

Signed at (place)

D	D	M	M	Y	Y	Y	Y
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Date

*Signature of Parent 2/Legal Guardian:

Signed at (place)

D	D	M	M	Y	Y	Y	Y
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Date

*Signature of Witness:

Signed at (place)

D	D	M	M	Y	Y	Y	Y
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Date