## (For candidate use only)

## Wahunsenakah Lodge #333 Candidate New Member Form

Serving Colonial Virginia Council #595

P.O. Box 12144

Updated 01/31/2025 SJ

Newport News, VA. 23612 Phone: 757-595-3356

| (For candidate use of This form is <b>not</b> available: \$65.00 Registrice: \$75.00 Registrice: \$75.00 Registrices payable to | ilable at the Scout Se<br>ration deadline, with<br>ration deadline, with | hout late fee                              | e, is two Sa |     |                                        |       |          |  |
|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------|--------------|-----|----------------------------------------|-------|----------|--|
| Winter Service Weekend, March 7-9, 2025 Camp Lions Spring Service Weekend, May 16-18, 2025 Camp Kiwanis                         |                                                                          |                                            |              |     |                                        |       |          |  |
| . •                                                                                                                             | •                                                                        |                                            | •            |     |                                        |       |          |  |
| Summer Service Weekend, September 19-21, 2025 Camp Lions  Please Check the Weekend you are attending.                           |                                                                          |                                            |              |     |                                        |       |          |  |
| Please print and co                                                                                                             | •                                                                        |                                            | nk.          |     |                                        |       |          |  |
| First Name & Middle Initial                                                                                                     |                                                                          | Last name                                  |              |     | Phone Number & Area Code  Best Phone # |       |          |  |
| Scouting National ID Number                                                                                                     |                                                                          |                                            |              |     |                                        |       |          |  |
| Emergency Phone #                                                                                                               |                                                                          |                                            |              |     |                                        |       |          |  |
| Show your name above exactly as shown on your Scout registration card.                                                          |                                                                          | Date of Birth  Month                       |              | Day |                                        |       | /ear     |  |
| Mailing Address                                                                                                                 |                                                                          | City                                       |              |     |                                        | State | Zip Code |  |
| e-Mail Address (require                                                                                                         |                                                                          | ADULT - Youth Protecti                     |              |     | on Date:                               |       |          |  |
| Unit (Troop, Crew, etc.                                                                                                         | Your Position in Scouting. Show primary registration position.           |                                            |              |     |                                        |       |          |  |
| Under 21                                                                                                                        | Current Rank                                                             | School grade (if applicable) at this time. |              |     |                                        |       |          |  |
|                                                                                                                                 | If on military duty, give service and rank.                              |                                            |              |     |                                        |       |          |  |
| 21 & Over                                                                                                                       | Summary of Scouting experience (as a youth and adult)                    |                                            |              |     |                                        |       |          |  |
| Check one                                                                                                                       | Youth Below the age of 18.  Adult 18 and older.                          |                                            |              |     |                                        |       |          |  |

I have the following dietary or physical limitations that might affect my participation.

Completed Medical form attached \_\_\_\_\_\_.