

GHANA SCOUT ASSOCIATION

NATIONAL HEADQUARTERS, ACCRA



MEMBERSHIP REGISTRATION DATA FORMS

REGION:

DISTRICT:

GROUP:

UNIT #:

Membership Registration Data Forms General Information

- This form is aimed to assist in the collecting of information regarding young people under at all levels of the unit, who are members and those looking to join the Ghana Scout Association (GSA).
- The data will help the Ghana Scout Association in understanding the makeup of the membership; monitoring progress against its inclusivity objective, and prioritizing development work both nationally and locally, and will identify and help Leaders meet any specific needs of individuals.
- The form is designed so that the information is collected in the correct order to help with the inputting of information on the National Headquarters System to support the application process and current and potential future involvement in Scouting and for ID card generation.
- All young people aged 18 years and below should complete the Parent Consent Forms and signed by their Parents/Guardians.
- Soft copy passport photograph should bear the corresponding saved format numbers for easier processing.
- GSA, at all levels, will use each and every young person details to contact them with information relevant to Scouting.
- This application will be forwarded to the National Headquarters and a copy will be kept by appropriate personnel (i.e. Unit Leader, District Council and Regional Council) for response in the event of a medical emergency. It is the responsibility of the adult leader or the parent/guardian of the young person to notify/update appropriate personnel of any changes in their medical status or other information contained in this form that may occur throughout the Scouting year.
- Should you require any support with the completion of this form, you can contact your District Commissioner or the National Headquarters on **0302 663 627** or by email ghscassohq@yahoo.co.uk



GHANA SCOUT ASSOCIATION
P. O. BOX GP 108, ACCRA – GHANA
TEL.: 0302 663 621 EMAIL: ghscassohq@yahoo.co.uk
MEMBERSHIP REGISTRATION DATA FORM

APPLICANT INFORMATION

IMAGE ID. NO#

.....

Scout Membership Form #: District Verification Sign:
Parent Consent Form #: Regional Council Sign. #
Group Sponsor/Open Sign: National HQ Endorsement#

Surname:

First Name(s):

D.O.B (dd/mm/yyyy):

Religion:

Gender: Male Female

Mobile:

Occupation:

Company/Institution:

Address:

Mobile:

Email:

I hereby make application to register with the GSA in the position indicated and agree to abide by the principles of the scouting programme for the benefit of the youth I will serve.

Signature:

Date:

APPLICANT INFORMATION

IMAGE ID. NO#

.....

Scout Membership Form #: District Verification Sign:
Parent Consent Form #: Regional Council Sign. #
Group Sponsor/Open Sign: National HQ Endorsement#

Surname:

First Name(s):

D.O.B (dd/mm/yyyy):

Religion:

Gender: Male Female

Mobile:

Occupation:

Company/Institution:

Address:

Mobile:

Email:

I hereby make application to register with the GSA in the position indicated and agree to abide by the principles of the scouting programme for the benefit of the youth I will serve.

Signature:

Date:

Note the registration fees of the scouting programme that you wish to register with according to your age

| | | | |
|--|---|---|--------------------------|
| Cub Scouting (Ages 8 – 10) GHC 5 | Scouting (Ages 11 – 13) GHC 8 | Venture/Rover Scouting GHC 10 | Leaders GHC 15 |
|--|---|---|--------------------------|



GHANA SCOUT ASSOCIATION

P. O. BOX GP 108, ACCRA – GHANA

TEL.: 0302 663 621 EMAIL: ghscassohq@yahoo.co.uk

SCOUTING UNIT REGISTRATION APPLICATION

SUMMARY SHEET

List each person who is registering in the scouting unit. Use as many summary sheets as required to list all youth

| # | Registration/ Image Number | Full name of youth | Birth Date (mm-dd-yyyy) | Sex (M/F) | Amount Paid (GHC) |
|----|-------------------------------|------------------------------|----------------------------|--------------------------------|-----------------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |
| 14 | | | | | |
| 15 | | | | | |
| 16 | | | | | |
| 17 | | | | | |
| 18 | | | | | |
| 19 | | | | | |
| 20 | | | | | |
| 21 | | | | | |
| 22 | | | | | |
| 23 | | | | | |
| 24 | | | | | |
| 25 | | | | | |
| | | Total number of youth | | Total applic ations | Total Amount (GHC) |



GHANA SCOUT ASSOCIATION

P. O. BOX GP 108, ACCRA – GHANA

TEL.: 0302 663 621 EMAIL: ghscassohq@yahoo.co.uk

SCOUT UNIT REGISTRATION APPLICATION

| Unit Number | Scout Group Sponsor/Open | District & Zone | Regional Council | |
|--|---|--|-------------------------------------|-----------------------------------|
| Indicate if the unit is new or existing and circle the type of scouting unit applying for registration | | | | |
| New or Existing | Cub Scout Pack Ages 8 to 10 | Scout Troop Ages 11 to 13 | Venture Scout Team Ages 14 to 17 | Rover Scout Crew Ages 18 to 21 |
| Scout Group Sponsor | | Address | | Telephone |
| Scout Group Representative | | Telephone | | Email Address |
| Registration requirements – Provide the required information to sponsor a Scout group of one or more units | | | | |
| Scouting Position | Name of Person | | Application Included | Trained or New |
| Group Sponsor Representative | | | | |
| Unit Committee Chairman | | | | |
| Committee Member | | | | |
| Committee Member | | | | |
| Unit Leader | | | | |
| Assistant Unit Leader | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| List the Scouts to be included in the scouting unit on the youth summary sheet page two and attach an individual registration form for each scout and adult to be registered. | | | | |
| The annual registration fee for a Scouting group sponsor is GHC 15. The Scouts and Leaders pay an individual registration fee according to their age. (See the youth and adult registration applications.) | | | | |
| Collected and attached by: | | | On date: | |
| Scout Group Sponsor / Open Certification Signature & Date: | District Verification Signature & Date: | Regional Council Endorsement Signature & Date: | National Approval Signature & Date: | |
| National Membership Committee processing date: | | Registration card shipment date: | | |