

# NYLT Application

(Please attach a \$75.00 non-refundable deposit or full payment of \$150.00 and BSA Class 1 and 2 medical forms. Registration is limited to the first 48 participants. All registration materials must be received by May 1, 2009.)

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_ TROOP#: \_\_\_\_\_ DISTRICT: \_\_\_\_\_ BIRTHDATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE: \_\_\_\_\_

*On my honor as a Scout, I promise that I will live according to the Scout Oath, Scout Law, and the Code of Conduct during NYLT and thereafter. I will set an example for others and do all that I can to pass along my knowledge and skills to fellow Scouts.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ T-Shirt size: S M L XL 2XL

## Scoutmaster's Approval

As Scoutmaster of Troop \_\_\_\_\_, I recommend the Scout listed above attend NYLT. I understand that this Scout will learn leadership skills, vision development, team development, leadership styles, conflict resolution and planning skills that will aid my troop. I will give the Scout the opportunity to use these skills for our troop.

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

**Parent or Guardian Approval:** I approve the participation of my son named above as a participant in the GSMC's NYLT to be held at Camp Buck Toms on the week of May 31 – June 5, 2009. My son and I will discuss the code of conduct included in the participant and the expectations that it implies.

Emergency Contact if I cannot be reached: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Scout: \_\_\_\_\_

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone1: \_\_\_\_\_ Phone2: \_\_\_\_\_

**Medical Authorization:** I, the undersigned, do hereby authorize the Boy Scout Leaders, or any such substitute as may be designated, as agent for the undersigned to consent to any X-Ray examination, anesthetic, medical, dental or surgical diagnosis or treatment and hospital care for the above named minor, which is deemed advisable by and to be rendered under the general or special supervision of any physician or surgeon, whether such diagnosis or treatment is rendered at the office of said physician or dentist, at a hospital, Scout camp or elsewhere. To the extent that any cost is not covered by BSA insurance, I agree to be responsible for such costs.

Primary Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by office staff (Account Code – 911)**

Fees paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Assigned to patrol: \_\_\_\_\_ Personal Health & Medical Form Class 1&2 rec'd: \_\_\_\_\_

## **What is National Youth Leadership Training (NYLT)?**

A six day experience conducted by the Great Smoky Mountain Council held at Camp Buck Toms. This comprehensive program is designed to equip Scouts with everything they will need to become a successful leader. This course includes:

- Management and planning skills training
- Team building and personal development skills training
- Instruction on how to be an effective communicator
- Leadership training ranging from teaching skills to conflict resolution
- Creating an environment of Scouting fellowship and fun guided by the Scout Oath and Law

## **Age and Rank Requirements**

1. 13 years of age by May 31, 2009
2. First Class, Star, Life or Eagle Rank
3. Must hold, or be preparing for, a troop leadership position
4. Must have Scoutmaster recommendation

## **How much does NYLT cost?**

The cost of the six day course is \$150. This covers all program supplies, lodging, meals, patch and T-shirt.

## **Questions?**

Paul Waite, NYLT Scoutmaster

**Phone:** (865) 680-5234

**Email:** [p\\_waite@bellsouth.net](mailto:p_waite@bellsouth.net)

Leona Layman, NYLT Course Director

**Phone:** (423) 462-4024

**Email:** [leonalayman@yahoo.com](mailto:leonalayman@yahoo.com)

NYLT 2009  
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Great Smoky  
Mountain Council  
National Youth  
Leadership Training  
Camp Buck Toms  
May 31 – June 5, 2009



Great Smoky Mountain Council, BSA  
P.O. Box 51885  
Knoxville, TN 37950-1885