



**BOY SCOUTS OF THE PHILIPPINES**

181 Natividad Almeda-Lopez Street, Ermita, Manila 1000

**APPLICATION FOR ADULT REGISTRATION**

AAR **No.** \_\_\_\_\_

Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Civil Status: \_\_\_\_\_  
*Surname First Name M.I.*

Tenure in Scouting \_\_\_\_\_ Membership Card No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

To serve as: \_\_\_\_\_  
*Scouting Position Unit No.*

\_\_\_\_\_  
*Sponsoring Institution*

\_\_\_\_\_  
*Council*

Mailing Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Religion: \_\_\_\_\_

Profession/Occupation: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Other Affiliations: \_\_\_\_\_ Registration status:  New  Reregistering

**SAFE FROM HARM**

World Scouting emphasizes that the achievement of Scouting’s Mission makes it essential for the Movement to provide young people with a “safe passage” based on respect for their integrity and their right to develop in a non-constraining environment. The Boy Scouts of the Philippines implements “Safe from Harm” on the conviction that all adults and children have a right NOT to be abused. This is a fundamental human right. Abuse can take the form of bullying, physical abuse, emotional abuse, neglect, sexual abuse and exploitation. It is important to note that young people can suffer from one or a combination of these forms of abuse. Abuse can take place at home, at school or anywhere young people spend time. In the great majority of cases, the abuser is someone the young person knows, such as a parent, teacher, relative, leader or friend. The main objective is to ensure that no one will be exposed to abuse. Good child protection practice means making sure that everyone is aware of signs of potential abuse. It is based upon the Declaration on the Rights of the Child and Human Rights.

I hereby commit and fully subscribe to the existing Safe From Harm Policy of the Boy Scouts of the Philippines, and that I hereby absolve and free the BSP from any liability arising from any of my acts contrary to the policy. I hereby accept that the BSP may immediately revoke my registration as an adult leader upon violation of such policy.

\_\_\_\_\_  
Signature Over Printed Name

REGISTRATION FEES	
<i>Please check one;</i>	<b>RATE</b>
<input type="checkbox"/> LCEB Members	500.00
<input type="checkbox"/> UL/AUL	60.00
<input type="checkbox"/> Lay Leaders	100.00
AMOUNT PAID	_____
Paid Under OR. No. _____	Date _____

LOCAL COUNCIL OFFICE ACTION	
Processed : _____	_____
Registration Officer	Date
Approved : _____	_____
Council Scout Executive	Date
REGIONAL OFFICE ACTION	
Checked : _____	_____
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