



# *National Youth Leadership Training* **NYLT Brownsea**



## **Location, Date and Time**

Camp Shands, 1453 Baden Powell Road, Hawthorne, FL

Sunday, July 18 to Saturday, July 24 of 2010

Check in: 12 pm (noon) Sunday. Graduation: 9 am to 10 am Saturday.

## **Purpose of NYLT**

NYLT aims to give each participant toolbox of essential leadership skills, the ability to set and achieve goals, the confidence and experience necessary to run their troop, an opportunity to share ideas and experiences with Scouts from all around the North Florida Council, and - of course - a chance to have FUN!

## **Who Should Attend?**

Registered Boy Scouts that, by July 18:

- Are at least 14 years old, but not yet 18
- Are First Class Scouts
- Are current or future leaders in their Boy Scout troops
- Can cook, hike, swim, and camp in any weather

## **Registration Information**

Space is limited to the first 64. Spaces filled based on date of paid registration. Cost is \$200; \$185 if paid by June 4, 2010; \$175 if paid by April 30.

Cost includes all meal, camping, patch, printing, T-shirt, and activity expenses. A packing list will be sent to each participant with his acceptance letter.

For more information, email [info@nfcnylt.org](mailto:info@nfcnylt.org) or visit [www.nfcnylt.org](http://www.nfcnylt.org).

2010 NYLT Senior Patrol Leader: Jonathan Koch

2010 NYLT Scoutmaster: Jose Lepervanche

# NYLT PARTICIPANT APPLICATION

**STATEMENT FROM SCOUT**  
 Name: \_\_\_\_\_ My friends call me: \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone Number: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
 City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Troop: \_\_\_\_\_ District: \_\_\_\_\_ Birthdate: \_\_/\_\_/\_\_ (MM/DD/YY) Age: \_\_\_\_\_  
 Current Rank: \_\_\_\_\_ Current Troop Leadership Position: \_\_\_\_\_  
 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 I can to pass along my new knowledge and skills to my fellow Scouts.  
 Scout's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SCOUTMASTER'S RECOMMENDATION & SWIM CERTIFICATION**  
 As Scoutmaster of Troop \_\_\_\_\_, I recommend that \_\_\_\_\_ attend NYLT. I understand that he will develop leadership skills and gain vision development, team development, leadership styles, conflict management and planning skills that will aid my troop. I will give him the opportunity to use these skills to improve my troop. I certify that he has passed a BSA Swimmer's Test this year, conducted by a BSA certified Lifeguard, Aquatics Instructor, or Aquatics Supervisor, or a certified lifeguard, swimming instructor or coach (the "tester").  
 Date of Swim Test: \_\_/\_\_/\_\_ Name of tester: \_\_\_\_\_  
 Tester's phone: \_\_\_\_\_ Tester's signature: \_\_\_\_\_  
 Scoutmaster's signature: \_\_\_\_\_ Daytime phone: \_\_\_\_\_  
 Name (print): \_\_\_\_\_ Date: \_\_\_\_\_ Evening phone: \_\_\_\_\_

**PARENT/GUARDIAN APPROVAL**  
 I approve the participation of my son named above as a participant in NYLT to be held at Camp Shands from July 18 to 24, 2010. My son and I have discussed the NYLT Code of Conduct and the standards to which he will be held. I authorize the North Florida Council, BSA to take photos or video footage of my Scout and/or family for promotional purposes ONLY. Photos and videos will not be sold or utilized for any use outside of youth and volunteer recruitment by the North Florida Council, Boy Scouts of America.  
 Signed: \_\_\_\_\_ Date: \_\_/\_\_/\_\_ Cell Phone: \_\_\_\_\_  
 Name (print): \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Name an emergency contact, in case you cannot be reached: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail [info@nfcnylt.org](mailto:info@nfcnylt.org) if you have been classified Swimmer before but cannot organize a swim test prior to the course.

**Mail this form to:**  
 NYLT Application  
 North Florida Council, BSA  
 521 S. Edgewood Avenue  
 Jacksonville FL, 32205

Attach the \$200 fee (or \$185 < June 4<sup>th</sup>, \$175 < April 30<sup>th</sup>) and a completed BSA medical form:  
 • Parts A, B & C of the new Annual Health Medical Record (see <http://www.scouting.org/filestore/pdf/34414.pdf>)

**Payment Method (circle one)**    **Cash** | **Check** | **MasterCard** | **Visa**    **Event Code: 039**  
 Check enclosed for \$\_\_\_\_\_ or \$\_\_\_\_\_ to be paid by credit card

**For Credit Card Payment:**  
 Name of Cardholder \_\_\_\_\_  
 Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Signature on Card \_\_\_\_\_ 3-digit Security Code \_\_\_\_\_

**FOR OFFICE USE ONLY**  
 Fee paid: \$\_\_\_\_\_ Date: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Assigned to Patrol: \_\_\_\_\_  
 Personal Resource Questionnaire received: Y/N Personal Health & Medical Form received: Y/N Notes: \_\_\_\_\_

# NYLT *PERSONAL RESOURCE QUESTIONNAIRE*

My name: \_\_\_\_\_ My friends call me: \_\_\_\_\_  
 City: \_\_\_\_\_ Troop: \_\_\_\_\_ District: \_\_\_\_\_  
 Age: \_\_\_\_\_ Birthdate: / / Years in Boy Scouting \_\_\_\_\_ T-shirt size: S | M | L | XL  
 School & Grade (next fall): \_\_\_\_\_, the Languages spoken: \_\_\_\_\_

Describe any restrictions on your activities or food: \_\_\_\_\_  
 \_\_\_\_\_

Current Troop Leadership Position: \_\_\_\_\_ Current Rank: \_\_\_\_\_  
 List leadership positions held with your community/Scouting and when: \_\_\_\_\_  
 \_\_\_\_\_

List leadership training classes attended (indicate date and location of class):  
 Troop Leadership Training: \_\_\_\_\_  
 other (explain) \_\_\_\_\_

Explain why you are interested in participating in NYLT and what you expect to gain from it: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## *OUTDOOR SKILLS*

Indicate badges earned:  First Aid  Camping  Backpacking  Personal Management  
 Total number of merit badges earned: \_\_\_\_\_ (including any not listed here)  
 Indicate outdoor experience:  50 Miler  Philmont  Northern Tier  Sea Base  
 Nights camped in past 12 months: \_\_\_\_\_ Miles hiked in the past 12 months: \_\_\_\_\_  
 I attended a BSA Summer Camp last year. Where: \_\_\_\_\_

Please place a check-mark opposite the skill in the one column which best represents your ability. Do not over- or under-rate yourself as this information will be used to adjust the program to best suit your ability.

Skills (circle all MBs earned)	Need Help	Can Do	Have Taught
Map reading (Orienteering MB)			
Compass (Orienteering MB)			
Backpacking (Backpacking MB)			
Camping (Camping MB)			
Safe Swim Defense (Swimming MB)			
Knife & Ax use			
Fire building			
Cooking (Cooking MB)			
Knots & lashing (Pioneering MB)			

## *NYLT Statement of Understanding and Code of Conduct*

### **Statement of Understanding:**

All NYLT course staff and Participants are selected to represent their local councils based on their qualifications in character, camping skills, physical and personal fitness, and leadership qualities. Therefore, NYLT course staff, participants and their parents or guardians are asked to read this Code of Conduct and Statement of Understanding as a condition of participation. It is with the further understanding that serious misconduct or infraction of rules and regulations may result in expulsion from the NYLT course. Ultimately, we want each staff member and participant to be responsible for his or her own behavior, and only when necessary will the procedure be invoked to send a staff member or participant home from the NYLT course. It is understood NYLT participants will tent camp and all are expected to be in full uniform.

### **Code of Conduct:**

1. The Scout Oath and Law will be my guide throughout the NYLT Course.
2. I will set a good example by keeping myself neatly dressed and presentable in the proper NYLT course uniform.
3. I will attend all scheduled programs and participate as required in cooperation with the NYLT course staff and participants.
4. I will be responsible for keeping my tent and personal gear labeled, clean and neat. I will do more than my share to prevent littering of the BSA Camp we are using.
5. I understand that the purchase, possession, or consumption of alcoholic beverages or illegal drugs by any NYLT course staff and participants is prohibited. Any violation of this code will be grounds for expulsion.
6. Serious and/or repetitive behavior violations by youth, including use of tobacco, cheating, stealing, dishonesty, swearing, fighting, and cursing, will result in expulsion from the NYLT course.
7. I understand that gambling of any form is prohibited.
8. I understand that improper use of lasers and fireworks may result in expulsion from the NYLT course.
9. I will demonstrate respect for NYLT course and BSA Camp property and be personally responsible for any loss, breakage, or vandalism of property as a result of my actions.
10. Neither NYLT Course Staff nor the BSA Camp Staff will be responsible for loss, breakage, or theft of personal items. I will label all my personal items and leave items of value at home. Theft will be grounds for expulsion.
11. While participating in any NYLT course activities, I will obey the safety rules and instructions of all staff members.
12. In accordance with U.S., local and state laws, adult leaders and all youth are prohibited from having firearms and weapons in their possession.
13. Scoutmasters and assistants will be guided by the Scout Oath and Scout Law and will obey all U.S., local, and state laws.
14. All NYLT Course staff (adults and youth) must receive Youth Protection training prior to course, and follow these guidelines at all times while on course.
15. Hazing or any action which fails to show respect for an individual, has no place in Scouting.
16. Serious violations of this code may result in expulsion from the NYLT course. All decisions will be final.
17. I certify that I have read the Statement of Understanding and agree to abide by the conditions in the Code of Conduct of the NYLT course. \_\_\_\_\_

(signature)

All NYLT Course adult leaders are responsible for the supervision of all course staff and participants in respect to maintaining discipline, security, safety, and the NYLT Code of Conduct.