



**Washington State Fair
Scout Service Unit
2016 Washington State Fair Application**



Name: _____ Phone: _____

Address: _____ City: _____ ST: _____ Zip+4 _____

E-mail: _____ Youth: _____ Date of Birth: _____

Adult: _____ **TROOP LEADERS MUST BE CURRENT ON YOUTH PROTECTION!**

Scout Unit (Type): _____ Unit #: _____ Rank: _____

Grade in School: _____ Leadership Position(s) Held in Unit: _____

Taking Medication? Yes: _____ No: _____ (If yes, explain on reverse side of form)

If you do not have a Washington State Fair jacket or t-shirt, please enter sizes: Jacket: _____ T-shirt: _____

To indicate the days and hours you are able to volunteer during the 2016 Washington State Fair please circle the date and times below.

					Fri. Sept. 2 nd	Sat. Sept. 3 rd
					AM shift	AM shift
					PM shift	PM shift
Sun. Sept. 4 th	Mon. Sept. 5 th	Tues. Sept. 6 th	Wed. Sept. 7 th	Thurs. Sept. 8 th	Fri. Sept. 9 th	Sat. Sept. 10 th
AM shift	AM shift	closed	AM shift	AM shift	AM shift	AM shift
PM shift	PM shift		PM shift	PM shift	PM shift	PM shift
Sun. Sept. 11 th	Mon. Sept. 12 th	Tues. Sept. 13 th	Wed. Sept. 14 th	Thurs. Sept. 15 th	Fri. Sept. 16 th	Sat. Sept. 17 th
AM shift	AM shift	closed	AM shift	AM shift	AM shift	AM shift
PM shift	PM shift		PM shift	PM shift	PM shift	PM shift
Sun. Sept. 18 th	Mon. Sept. 19 th	Tues. Sept. 20 th	Wed. Sept. 21 st	Thurs. Sept. 22 nd	Fri. Sept. 23 rd	Sat. Sept. 24 th
AM shift	AM shift	closed	AM shift	AM shift	AM shift	AM shift
PM shift	PM shift		PM shift	PM shift	PM shift	PM shift
Sun. Sept. 25 th						
AM shift						
PM shift						

Please note: The AM shifts are 9:00 am to 3:30 pm
The PM shifts (Sun - Thurs) are 3:00 pm - 9:00 pm
The PM shifts (Fri & Sat) are 3:00 pm - 10:00 pm

I am applying to serve with The Scout Service Unit at the Washington State Fair on the dates indicated above.

I understand that I must wear an approved Scout Uniform at all times!

"I promise to do my best and be guided by the rules established for the operation of this Unit and will obey the instructions of the Junior and Adult Leaders in charge."

Signature _____ Date _____

Parent or Guardian Approval

I/We approve the above application and voluntarily waive any claim against the Pacific Harbors Council and the Boy Scouts of America, their appointed leaders and the Washington State Fair for any and all causes, which may arise in connection with the activities of the Washington State Fair Scout Service Unit.

I give permission for the applicant to receive any medical care deemed necessary by competent Medical Authority and the Adult Leaders.

