

Scoutmaster Position Specific Training



Scoutmaster Position Specific. Required for all Scoutmasters, Assistant Scoutmasters, and Leaders of 11-Year Old Scouts to satisfy the council's 100% position trained policy. Learn how a troop works and how to work with boy leaders and run an effective Boy Scout troop. To be considered position trained, this course must be completed in addition to IOLS. Download the attached form to register and pay.

HOW TO REGISTER AND PAY YOUR FEE

1. REGISTER AND PAY ONLINE: (The preferred method) Go to <http://tentaroo.com/tidewater>. Log in to your account. If you or your unit do not have a Tentaroo account, then create your free "Individual/Group" account, fill out all personal information, select the "Scoutmaster-05/20/2017" event and follow the instructions on the web site to register. A 3% convenience fee will be added to pay for credit card or e-check processing and Tentaroo system use and to compensate the time you'll save.

2. REGISTER ONLINE, BUT PAY AT OFFICE: Register online at the link above, choose \$0.00 payment and use this form to pay at the council.

3. REGISTER AND PAY AT COUNCIL OFFICE: Use this form to register and make payment at the council office. Make payment in person or mail to *Tidewater Council, BSA, 1032 Heatherwood Drive, Virginia Beach, VA 23455*

ACCOUNT #:	1-6801-157-20	SW=	7101
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WHEN:	Saturday, May 20, 2017 8:00 AM to 12:00 PM Check-in begins at 7:30 AM
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WHERE:	Holy Family Catholic Church 1453 N Road St, Elizabeth City, NC 27909
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FEE:	\$8.00
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WHO SHOULD ATTEND: All Scoutmasters, Assistant Scoutmasters, and Leaders of 11 year old scouts.

PREREQUISITES: NONE, but Youth Protection Training, This is Scouting, IOLS, Scoutmaster position specific training are needed to meet the requirements for a leader to be fully trained.

WHAT TO BRING: Scoutmaster Guide book.

COURSE DIRECTOR FOR MORE INFO:	Christy Cooper (208) 597-6044, cyoung1130@yahoo.com
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ADDITIONAL COURSE INFO:	http://tidewaterbsa.com/events/ . Lookup the course date.
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PARTICIPANT REGISTRATION INFORMATION

DATE:	NAME:	PHONE:	EMAIL (ADULT ONLY):
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ADDRESS:	CITY:	STATE:	ZIP:
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ADULT / YOUTH	UNIT NUMBER:	REGISTERED POSITION:	BSA ID (REQUIRED):
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DISTRICT:	ADDITIONAL INFO: NONE
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YOUR DIETARY OR OTHER RESTRICTIONS: