PACIFIC COAST COUNCIL
664 West Broadway, Vancouver, B.C. V5Z 1G1
Phone: 604-879-5721 or 1-888-726-8876
Fax: 604-879-5725
E-mail : pacificcoast@scouts.ca

OFFICE USE ONLY
Course _____
Received on _____
Member _____

REGISTRATION FOR TRAINING EVENTS

PLEASE REGISTER ME FOR THE FOLLOWING

☐ Woodbadge I
- ☐ Core
- ☐ Colony
- ☐ Pack
- ☐ Troop
- ☐ Company
- ☐ Crew

☐ Woodbadge II
- ☐ Core
- ☐ Colony
- ☐ Pack
- ☐ Troop
- ☐ Company
- ☐ Crew

☐ Training Skills (previously Trainer I)
☐ Training Management (previously Trainer III)

☐ Training Design & Evaluation (previously Trainer II)

☐ Other _____ (Please specify)

Please Note: A candidate is not considered registered until this form is received at the council office.

(PLEASE PRINT)

COURSE DATE(S): _____ LOCATION: _____

NAME: _____ SEX: M ☐ / F ☐ AGE: (IF UNDER 18) _____

PHONE: RES. _____ BUS. _____ CEL. _____

FAX. _____E-mail _____

ADDRESS: _____POSTAL CODE: _____

GROUP NO: _____ AREA : _____COUNCIL: _____

PRE-REQUISITES / PREVIOUS TRAINING

WOODBADGE I: _____
(section) (date) (location)

WOODBADGE II: _____
(section) (date) (location)

OTHER TRAINING (PLEASE LIST): _____
Please attach separate sheet if required

DATE:_____ APPLICANT'S SIGNATURE: _____

for Training Design & Evaluation, Training Management only.

To the best of my knowledge, this candidate is prepared for the requested training and will make use of the course content for scouting purposes.

Signed: _____ Date : _____
Area / Council Commissioner

for Woodbadge I and Woodbadge II only

To the best of my knowledge, this candidate is prepared for the requested training and will make use of the course content for scouting purposes.

Signed: _____ Date :_____
Group Commissioner

Signed : _____
Section Leader (If Applicant is under 18 years of age)

This form is to be mailed / faxed / emailed to the above, who will forward immediately to the course administrator.

Reset Form