

PROJECT C.O.P.E. APPLICATION

This application **MUST** be completed and signed by the Scoutmaster and applicant prior to participating in the C.O.P.E. Program.

The following criteria have been developed and are prerequisites to the program:

1. Applicant is at least a First Class Scout Rank
2. Applicant is at least 13 years old (13th birthday by January 1st)
3. Good physical and mental health
4. Scoutmaster Approval
5. Health Officer approval

NAME OF APPLICANT _____

Date of Birth _____

Address: _____

City: _____ State: _____ Zip: _____

Troop #: _____

Parent or Guardian Phone Number: _____

SCOUTMASTER APPROVAL: _____ Date: _____

HEALTH OFFICER APPROVAL: _____ Date: _____

APPLICANT'S SIGNATURE: _____

Complete this form and submit it to the C.O.P.E. Director prior to your course time.

NO FORM = NO PARTICIPATION