## **SOUTH AFRICAN SCOUT ASSOCIATION SASA/RAF**

Allergies: (Y/N) Details:



APPLICATION F	OR ROVER MEMB	ERSHIP	(Septeml	oer 2010		Membe	rship	No:			
(This form needs and between the	to be completed by ages of 18-30)	all people	wishing to	join SAS	A a Rovei	r who have	e not c	omple	ted an A	AM Forr	n,
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Dietary needs: \	Vegetarian / Diabe	tic / Halaa	ıl / Koshei	/ Other	(please	specify) _					

## **REFEREES**

Please provide details of two people, who are not related to you and who are preferably not members of SASA already who can be contacted to ascertain your suitability to join SASA. Suitable people would include religious leaders, superiors at work, headmasters or lecturers who know you well etc. The referees should know you well and be able to testify as to your character and suitability as someone who could have contact with minors.

Referee 1	Confidential Enquiry done: Date	Signature						
Referee Name Referee Addr Referee Contact								
How does the referee know you:								
Referee 2	Confidential Enquiry done: Date	Signature						
DECLARATION:								
I understand what my Honour means and that upon joining a Crew, I will be expected to commit myself to following the Scout Promise and Scout Law, and to dedicate myself to a life of Service, service to God, service to my country and my fellow citizens, and service to myself.								
I understand that if I have not previously been a Rover that I will be expected to complete a period of Squireship where my dedication to the Promise, the Law and to the principles of Service will be tested to the full. I will abide by the Constitution of the Crew that I am joining.								
I also undertake to follow the aims, rules and policies of the South African Scout Association should my application for membership be accepted.								
I declare the above information to be correct.								
I confirm that I am not currently under investigation for criminal activity and that I have never been censored for offences involving minors or offences which are sexual in nature.								
I confirm that I will advise the District Commissioner and the leadership of my Crew should I be accused of any such offences.								
I confirm that I will follow the Principles set out in PO&R, the Child Protection Policy and other Policies of SASA. I confirm that I am aware that these are available at Scout Shop and on the Internet at www.scouting.org.za and that I have the responsibility to familiarise myself with the contents of these documents.								
Applicant's Sign	ature E	Date						
Crew Chair/RSL	Signature E	Date						
DC Signature Date								