

## BAY-LAKES COUNCIL 2021 CHARTER RENEWAL TURN-IN CHECKLIST

**PLEASE ATTACH THIS FORM TO THE UNIT CHARTER RENEWAL PAPERWORK AT DISTRICT TURN-IN NIGHT.**

<b>UNIT TYPE:</b>	<input type="checkbox"/> Pack	<input type="checkbox"/> Troop	<input type="checkbox"/> Team	<input type="checkbox"/> Crew	<input type="checkbox"/> Ship	<input type="checkbox"/> Post	<b>DISTRICT:</b>	<input type="checkbox"/> GW	<input type="checkbox"/> TL	<input type="checkbox"/> LL	<input type="checkbox"/> KC	<input type="checkbox"/> MCM
<b>UNIT NUMBER:</b>	#							<input type="checkbox"/> HL	<input type="checkbox"/> NL	<input type="checkbox"/> VY	<input type="checkbox"/> LS	<input type="checkbox"/> EXP
<b>Charter Renewal Processor Contact Information: (Please print legibly)</b>												
<b>First &amp; Last Name:</b>												
<b>Telephone Number:</b>												
<b>Email Address:</b>												

1. **CHARTER RENEWAL APPLICATION & ANNUAL CHARTER AGREEMENT:** I have attached a complete printed copy of the final Charter Renewal Roster and Annual Charter Agreement. **ALL PAGES ARE REQUIRED.**
  
2. **REQUIRED SIGNATURES:** Page 2 of the charter renewal application must be signed OR electronically approved by the adult leader registered as the Exec. Officer or Charter Organization Representative. **SUBSTITUTE SIGNATURES ARE NOT VALID.**
  - Charter Organization Representative/Executive Officer Signature on Charter Roster
  - Electronic Signature Submitted Online
  
3. **YOUTH APPLICATIONS:** I have included an application for each youth joining our unit as of January 1/First day of renewed charter.
 

**Applications all include:**

  - Signed by the parent/guardian
  - Signed by the unit leader
  - ALL APPLICATIONS INCLUDE UNIT NUMBER, FULL NAME, BIRTH DATE, CURRENT GRADE, PARENT/GUARDIAN CONTACT INFORMATION.**
  
4. **ADULT APPLICATIONS:** I have included an application for each adult joining our unit as of January 1/First day of renewed charter.
 

**Applications all include:**

  - Signature from Committee Chair AND Chartered Organization Rep
  - Initials & responses to all questions/statements and signature by applicant
  - A signed Disclosure Authorization form for each application
  - A copy of the applicant's Youth Protection Training Certificate
  
5. **JOURNEY TO EXCELLENCE (JTE):** Award Level: \_\_\_\_\_
  
6. **PAYMENT:** One check (**preferred**) for all charter renewal fees payable to Bay-Lakes Council is included.
  
7. **ADDITIONAL INFORMATION:**  Unit Contact Information Form.

**FOR USE BY COUNCIL/DISTRICT PERSON RESPONSIBLE FOR REVIEWING THE CHARTER RENEWAL APPLICATION PRIOR TO TURN-IN TO COUNCIL.**

**District Turn-In Check List:**

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Full copy of charter renewal</li> <li><input type="checkbox"/> Required Signatures: Unit Leader, Executive Officer</li> <li><input type="checkbox"/> Youth application for all new members</li> <li><input type="checkbox"/> All required unit leader positions filled (<i>See Unit Leader Inventory Worksheet</i>)</li> <li><input type="checkbox"/> Adult applications for all new adult leaders, including Disclosure Authorization forms and Youth Protection Training Certificates</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Journey to Excellence form</li> <li><input type="checkbox"/> Charter Organization Agreement</li> </ul> |
|--|--|
- (Note: Adults renewing with the unit may change positions without an application only at charter renewal.)

<b>PAYMENT INFORMATION:</b>	Amount Due:	\$	Date Received:	
	Payment Method:	<input type="checkbox"/> Check #:	<input type="checkbox"/> Unit Acct Withdrawal	<input type="checkbox"/> Online

**REVIEWED BY:** \_\_\_\_\_

First & Last Name	Position	Date
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<b>COUNCIL OFFICE ONLY</b>		
<b>Received By:</b>		
First & Last Name	Position	Date