



BOY SCOUTS OF AMERICA
HORSESHOE SCOUT RESERVATION

**CHESTER COUNTY COUNCIL, BSA
CONFIRMATION OF COMPLIANCE
PA Act 153 and BSA Registration Policies**

As the primary leader of the *troop* | *pack* (*circle one*) I am confirming that, while in camp, all adult Pennsylvania residents in our unit who have a supervisory role over youth or who will spend a night are in compliance with PA Act 153 and have completed all necessary background certifications.

Initials

As the primary leader of the *troop* | *pack* (*circle one*) I am confirming that anyone over the age of 18, and who will be in camp for over 72 hours, is a registered adult in the BSA thus having completed youth protection training and an adult application.

Initials

Signature

Print Name

Troop/Pack Number

Council