Greater Tampa Bay Area Council
Unit Instructor Agreement

Instructor Name: ________________________________________ Date: ___________________

Camp:  ☐ Brorien  ☐ Soule  ☐ FASR  ☐ Sand Hill  Session:  ☐ AM  ☐ PM

Program Area:  ☐ Aquatics  ☐ Climbing  ☐ Shooting Sports  ☐ Kitchen

Role:  ☐ Director/Manager  ☐ Instructor

Fee for Instruction: _______________________

Instructor

By signing this form, I agree to the following:

- That I am a currently registered Scouting in the Greater Tampa Bay Area Council.
- That I possess the required certifications for the program run checked above.
- I will run the program according to all National and Council Standards and Procedure

Instructor Signature: _____________________________________ Date: ___________________

Unit Leader

By signing this form, I agree to the following:

- The Instructor on this form is present at camp.
- I have checked their credentials and agree they are properly trained to run the activity.
- I agree to compensate the instructor the Fee for Instruction listed above.
- The payment will be made to the Greater Tampa Bay Area Council within one week.

Unit Leader Name: ______________________________________ Unit: _________________

Unit leader Signature: ____________________________________ Date: ___________________

Return this form to:

- Director of Camping - Jason.borton@scouting.org
- Camping Secretary - Christine.chansley@scouting.org