

## **Parent /Guardian Questionnaire**

Dear parent Please fill in this form for our information  
We ask in case you have sets of skills we can draw on should we need them to help the group

**Name of child:**

*please circle the section your child is in*

**Section:** Beaver Cub Scout

Parents/Guardian names:

/

**P/G 1** what do you do for work?

**P/G 2** what do you do for work?

**Do you have any hobbies or interests that may be of interest to the group?**

**Would you like to get involved as a volunteer in the group?**

*If yes please circle the ones that interest you.*

Leader *(this is a role that requires time and training)*

Helper

Executive committee member

Fundraising and social committee member

Occasional helper

Skills instructor

At fundraising events

Other please put details here-

Thank you for filling in this form please return to the section leader or GSL