

Troop 165 Permission Slip

As the parent or legal guardian of _____ I hereby give my permission for this child to participate in an outing with Troop 165.

	<u>Time</u>	<u>Date</u>	<u>Location</u>
Drop off:	6pm	10-14-16	Crystal Lake Nature Center
Pick up:	12pm	10-16-16	Crystal Lake Nature Center

Activity: **Tougher Then A Scout Challenge**

Cost: \$ 20.00 Cash _____ Check # _____ Scout Account _____

I give permission to the leaders of the above unit to render First Aid, should the need arise. In the event of an emergency, I also give permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment, as needed.

I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing except for clear acts of negligence or non-adherence to BSA policies and guidelines.

In case of emergency, I can be reached by phone at _____ or _____.

If I cannot be reached, please contact _____ at _____.

Signed: _____ Date: _____
(Parent or Guardian)

Keep this portion for your reference during the outing

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Cost: \$20.00

Parents,

We will not be serving a meal on Friday evening, please make sure your son has dinner prior to dropping off at the Nature Center.

Please keep your phones handy on Sunday morning, your son will call to inform you of a more accurate arrival time to the Nature Center once we depart from Lake Geneva.