

## 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 Crew 165.

	<u>Time</u>	<u>Date</u>	<u>Location</u>
Drop off:	6:00PM	August 5, 2016.	Crystal Lake Nature Center
Pick up:	Will call/Mid day.	August 7, 2016	Crystal Lake Nature Center

**Activity: Kishwaukee River Canoe Trip**

**Cost is \$35.00 plus the cost of dehydrated food purchased by the scout.**

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)

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### Keep this portion for your reference during the outing

	<u>Time</u>	<u>Date</u>	<u>Location</u>
Drop off:	6:00PM	8-5-2016.	Crystal Lake Nature Center
Pick up:	Mid day/will call	8-7-2016	Crystal Lake Nature Center

**Activity: Kishwaukee River Canoe Trip 8/5-7**

**Cost: \$35.00/plus the cost of dehydrated food purchased by each scout**

Parents,