

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.

Time	Date	Location
Drop off: 5:15p	Friday 9/28/2018	Crystal Lake Nature Center
Pick up: Noon	Sunday 9/30/2018	Crystal Lake Nature Center

Activity: Air Camp

Payment Due Date:

Cost: \$ 30 Option: Take This Amount From My 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)

cut here and return the top with payment

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