

# Troop 111

## Permission Form

When: Apr 29<sup>th</sup> - May 1<sup>st</sup>, 2011

Event: **Pack 299 Spring "Civil War" Campout**

Departure: Friday, Apr 29<sup>th</sup>, 2011. Meet at Jerome United Methodist Church at 6 PM; departure at 6:30 PM sharp.

Return: Sunday, May 1<sup>st</sup>, 2011; late morning.

Cost: \$10 per person, this covers the cost of breakfast and lunch on Saturday. Please bring this form and payment to the next troop meeting on Apr 18<sup>th</sup>. (Checks made payable to: Troop 111)

\_\_\_\_\_ Please use my scout account to cover the cost of this event.

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Scout (name) \_\_\_\_\_ has my permission to attend the Pack 299 campout at Camp Muskingum located in Carrollton, OH. In consideration of the benefits to be derived, and having the full confidence that reasonable precautions will be taken to insure the safety and well being of my son during this outing, I hereby waive all claims against the Troop, and Local Council or their representatives, on account of any accident, illness or other damage that may occur in connection with this trip. My son is in good physical condition, unless I have noted otherwise on this slip:

### Parents Authorization:

In the event of an emergency and I cannot be reached by telephone or other reasonable means, I hereby: **(please check one of the following)**

\_\_\_\_\_ authorize permission for the physician selected by the adult leader in charge of my child

\_\_\_\_\_ do not authorize permission for the physician selected by the adult leaders in charge of my child

to hospitalize, secure proper anesthesia, other injections, to do surgery, and whatever else appears medically necessary for my child.

**Parent's or Guardian's Signature:** \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone (s): \_\_\_\_\_

**Insurance information on file with troop OR if new or changed...**

Medical Insurance Company: \_\_\_\_\_

Policy #: \_\_\_\_\_

### Transportation Support: (please check)

\_\_\_\_\_ I can transport scouts to/from this event and safely take \_\_\_\_\_ (number) people with seat belts.  
Kind, make and year of vehicle \_\_\_\_\_ Driver's License Number \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Liability Insurance each accident/each occurrence \_\_\_\_\_  
Property Damage limit \_\_\_\_\_

\_\_\_\_\_ I will attend this event from \_\_\_\_\_ (dates) as an adult helper.

\_\_\_\_\_ I can pull trailer to/from this event. Thanks!