

TROOP 12 Activity

At _____
Date _____, 2005

ARRANGEMENTS:

- **Meet** –
- **Pick-up**
- **Cost** - CASH/Scout for food - DUE TO EACH PATROL AT THE _____ Troop meeting. (No checks please the Scouts need cash to buy the food)
- **Bring - Personal equipment as listed in the Scout Handbook.** Including warm clothes, warm boots, extra blankets if using a light sleeping bag. **Avoid 100% cotton clothes.**
- NO video games, radios, tape/CD players or other electronic devices. NO sheath knives.

Each Scout **MUST** have the following permission slip completed and presented to the trip leader at a Troop meeting or at the beginning of the trip. Altered or incomplete slips will not be accepted.

------(detach here - keep top section)-----

My son _____ has my permission to attend the Troop 12 activity on (date) _____, 2005 at (place) _____. I agree to his participation in this activity and the other parts of this trip. I waive all claims against the leaders of this trip, officers, agents, and representatives of the Boy Scouts of America, and the sponsor. In the event of an emergency, the trip leaders have my permission to obtain medical treatment for this Scout at the nearest hospital or doctor, at my expense. During this activity I can be contacted at the following phones and will accept long distance calls. (____) _____; (____) _____. I agree to pick my son up in case of an emergency or a discipline problem.

(Signature of parent)

(date)

PICK-UP INFORMATION: Parent will pick-up YES _____ NO _____
Other person: _____
(name) (phone)

MEDICAL INSURANCE INFORMATION: Company _____,
Policy no. _____, Other _____
Date of Birth _____

Check here if additional information is listed below or on the back of this form. Including allergies, medications, medical conditions, special instructions and concerns.