

PERMISSION SLIP

▼ please sign and return to trip leader ▼

Members of Lincoln Boy Scout Troop 127 will travel to Camp Greenough Scout Reservation in Yarmouthport, MA, Sat Oct 8, 2011, returning Mon Oct 10. Scouts will ride in private vehicles driven by parents or leaders.

The scouts will be supervised by the Trip Leader, Scoutmaster Ian Clark and Assistant Scoutmasters Walter Gundy and John Solman. Other parents will be present in an unofficial capacity.

The cars will depart from the Scout House 9:00AM Saturday – rain or shine – and return at approximately 4:00 PM Monday. **Scouts must return all troop gear to the attic of the Masonic Lodge before being dismissed.**

Please bring your child, his pack, bicycle and helmet to the Masonic Lodge by 9:00AM on Saturday, so that other scouts are not inconvenienced by a delayed departure.

The parent or guardian of each scout must provide a telephone number. We will call ahead to announce our ETA on Sunday, and in case of any emergency.

Hold Harmless Agreement

I understand that participation in Scouting activities involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I have carefully considered the risk involved and have given consent for myself or my child to participate in this activity. I also understand that participation in this activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation. In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

I hereby give permission for my son _____ to participate in the BSA Troop 127 Camping Trip described above.

Parent or Guardian Signature

Date

Telephone number