



Troop 623 Activity Permission Slip

As the parent or legal guardian of _____ I hereby give my permission for him to participate in an outing with Troop 623.

WHAT: _____

DATE: _____

LOCATION: _____

SIGN-UP DEADLINE: _____

I give my 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 my permission to the physician, selected by the 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 an emergency, I can be reached by phone at:

_____ or _____

If I cannot be reached, please contact any of the following people:

_____ at _____

_____ at _____

I understand that if my Scout violates the Troop's rules and/or the Scout Law and/or Oath that he may be sent home and I will be called to pick him up at the activity site.

Signed _____
(Parent/Guardian) Date