

BSA TROOP 96 PERMISSION SLIP- October Campout

SIGNED PERMISSION SLIPS DUE: Monday, Oct 13, 2014

EVENT DATES: Friday, Oct 17 to Sunday, Oct 19, 2014

EVENT LOCATION: Camping at Channahon State Park on Friday night and at McKinley Woods along the I&M Canal on Saturday night

Meeting time: 5:30 PM on Friday, Oct 17 – St. Gilbert Parking Lot

RETURN: approx 11:30 PM, Sunday, Oct 19 (Call 847-223-7233 after 9:30AM for a better estimate)

EVENT COST: \$15 for food + fees for Civil War Reenactment. Payable in cash on Oct 13 meeting.

UNIFORM / CLOTHING: CLASS A UNIFORM for traveling

TRANSPORTATION: Adult leaders/parent will provide transportation.

BSA TROOP 96 PERMISSION SLIP – September Campout

EVENT DATES: Friday, Oct 17 – Sunday, Oct 19, 2014

EVENT LOCATION: "Hiking and Biking" campout. Camping at Channahon State Park on Friday night and at McKinley Woods along the I&M Canal on Saturday night

DEPART: 5:30 pm Friday evening – StG parking lot

SCOUT(S) _____ and _____ has my permission for full participation in BSA programs, subject to the limitations noted herein. I further agree that Troop 96 and its Junior and Adult Leaders, as well as the St. Gilbert Church and the Knights of Columbus shall be held free from liability, financially or otherwise, for any injury or accident incurred by my son during this event. I have also included a separate sheet with any special instructions regarding my son.

In case of emergency, I understand every effort will be made to contact me (or someone else if noted on this form). In the event I cannot be reached, I hereby give my permission to the medical personnel selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

Parent (Guardian) Signature: _____ Dated: ___/___/___ **Can Drive?: Y / N**

Parent phone number in case of emergency: _____ or _____

Allergies or other important information in an emergency: _____

Medications: _____

SPECIAL NOTE TO PARENTS: ONLY PARENTS OR OTHER FAMILY MEMBERS CAN PICK UP YOUR SCOUT.

IF ANYONE ELSE IS TO BRING YOUR SON HOME YOU MUST PROVIDE THAT AUTHORIZATION BELOW:

(NAME) _____ (CELL) _____ IS AUTHORIZED TO PICK UP MY SCOUT
AT THE CHURCH (PARENT SIGNATURE) _____ DATE ___/___/___