

## BSA TROOP 96 PERMISSION SLIP– Shooting Sports plus!

**SIGNED PERMISSION SLIPS and FEES DUE: Monday, May 16, 2016 (no exceptions)**

**EVENT DATES: Friday, May 20 to Sunday, May 22, 2016**

**EVENT LOCATION:** Tent Camping Camp Sol R. Crown near Wilmot. Shooting Sports on Saturday at the Bristol Shooting Range. Other activities offered for those not wishing to shoot.

**Meeting time: Gather at 5:15 pm Friday– St. Gilbert Parking Lot**

**RETURN:** approx 10:30 am, Sunday, May 22 (Call 847-223-7233 after 9AM for a better estimate).

**EVENT COST:** \$15/per scout for food. **An extra \$20 for ammo is required for each shooter.**

**UNIFORM / CLOTHING: CLASS A UNIFORM for traveling**



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**DEPART: 5:30 pm Friday – 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 # \_\_\_\_\_ Text # \_\_\_\_\_ Carrier: \_\_\_\_\_

>>>>Provide your phone text info for automatic notification on Sunday morning<<<<

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 \_\_\_\_/\_\_\_\_/\_\_\_\_