

BSA TROOP 96 PERMISSION SLIP– January Campout

SIGNED PERMISSION SLIPS DUE: Monday, January 8, 2018

EVENT DATES: Saturday, January 13 to Sunday, January 14, 2018

EVENT LOCATION: Camp Ohdakota near Burlington, WI

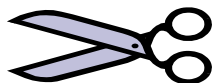
Meeting time: **Gather 8:00 AM on Sat, January 13– St. Gilbert Parking Lot**

RETURN: You will be notified by the driver upon departure from camp; due in GL about 4:00 pm

EVENT COST: \$15 for food. Payable in cash to the Patrol Leader on January 8.

UNIFORM / CLOTHING: **CLASS A UNIFORM** for traveling; dress for winter overnight conditions

TRANSPORTATION: **Adult leaders/parent will provide transportation.**



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DEPART: Gather at 6:30 AM Saturday morning – StG parking lot

SCOUT _____ 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, otherwise special arrangements must be made.