

# PERMISSION SLIP

TRIP: **Rodney Cabin Camp**

TRIP DATES: **February 14-16, 2020**

PERMISSION SLIP DUE DATE: **Tuesday, February 4, 2020**

\_\_\_\_\_ \$20 Food/Camp Fee = \_\_\_\_\_ Total Scout/Adult

Dear Parent,

This form is necessary and required for all unit trips. **No scout will be allowed to go to unless this form is signed and the food/camp fee is turned into me.** We will do everything in our power to protect your son (s). There will always be adequate supervision by the adult leaders and/or parents of the unit who will be on this trip.

In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational institution, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety of my son (s) on this activity, As the parent or legal guardian of \_\_\_\_\_, I hereby agree to his participation and waive all claims against the leaders of this trip and officers, agents, and representatives of Boy Scout Troop 716 and it's sponsoring organization and the Boy Scouts of America.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency. Phone: \_\_\_\_\_

**As the parent or legal guardian I also give 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 permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment as needed.**

Signature of Parents: \_\_\_\_\_ Date: \_\_\_\_\_

I can attend this trip. Parent's Name: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

I can transport \_\_\_\_\_ scouts in addition to myself.

Vehicle Year, Make, & Model \_\_\_\_\_

License Plate # \_\_\_\_\_

Yours in Scouting,  
Scott Snyder  
Scoutmaster, Boy Scout Troop 716  
Sykesville, MD 21784