

2011 HIGH ADVENTURE CANOE TRIP

Scout/Scouter Permission Slip

Complete one for every person attending
for

Name of person attending _____

Outing: High Adventure Canoe Trip 2011
Meet at church: Saturday July 23rd, 2011
Return to church: Sunday, July 31st, 2011

DUE DATE DEADLINE

MONDAY, JUNE 28, 2010

Cost \$550.00 (NO REFUNDS AFTER DUE DATE)

Payment Schedule:

06/28/2010	Deposit	\$125 per person
08/16/2010		\$75 per person
09/13/2010		\$75 per person
10/18/2010		\$75 per person
11/15/2010		\$75 per person
12/13/2011		\$75 per person
01/10/2011		<u>\$50 per person</u>
Total		\$550.00 per person

Medical Information:

- All scouts must have their Class I and Class II medical forms on file with the Troop. These forms must be renewed on an annual basis.

Age of person attending _____

_____ Yes my medical forms are on file

_____ No my medical forms are not on file

Emergency Contact Information:

Phone #1: _____

Phone #2: _____

If I cannot be reached, please contact _____ Phone: _____

I 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. I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing. As the parent or legal guardian of the above named person, I hereby give my permission for him to participate in this outing with Boy Scout Troop 26.

Signed _____ Date: _____
(parent or guardian or adult)

NOTE TO PARENTS:

Here is the group leader contact information.

Dan Dubow-630-936-6272-cell