TROOP 49 –BSA - OAKLAND, NEW JERSEY

Permission Slip

Activity: Canoe Trip and Tent Camping in Pine Barrens May 18-19

Scout(s) Name(s): _____ Date:_____

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 and well being of my Scout son/ward on the activity named, I agree to his participation and waive all claims against the leaders of the activity, officers, agents and representatives of the Boy Scouts of America. In the event of an emergency, an adult leader of this activity has my permission to obtain medical treatment for this Scout at the nearest hospital or doctor, at my expense, if our doctor is not readily available.

No scout will be allowed to go on the trip unless they have passed the "BSA Swimmer test".

I have read and understand the above.

_____ _____

Parent/Guardian's Signature Emergency Phone Number

Names of adults attending: _____

Please, no siblings on this trip.

My scout needs a ride (YES / NO)

I (will / will not) be driving and can take _____ additional riders.

Which boating option(s) are you choosing? _____ Partner(s)_____

A) 2 scouts share a canoe (list partner on permission slip)
B) 2 scouts and 1 adult share a canoe
C) 2 adults share a canoe
D) 1 scout or 1 adult on a single kayak
E) 2 scouts share a double kayak
F) 1 scout and 1 adult share a double kayak.

Identify special dietary needs if any: vegetarian / no pork / no peanuts / other _____

Fees

Scout(s) Qty_____ X $15.00ea = _____
Adult (s) Qty _____ X $15.00ea = _____
Total _____