

# BOY SCOUT TROOP 809 - PERMISSION SLIP

TRIP: Camping Backpacking Trip w/Shotgun Shooting  
DATE: March 16,17,18, 2018  
Meeting

PERMISSION SLIP DUE: February 11,2017 Troop

DESCRIPTION: On Friday, March 16th at 6:00 pm, the troop will meet at JUMC. We will then travel to Rodney Scout Reservation, in North East, MD, 400 Rodney Scout Rd, 21901. Weekend activities to include hiking, backpacking and supervised instruction in Shotgun shooting. There is a \$5.00 charge PP for instruction, use of range, weapon, targets and ammo. We will return to JUMC on Sunday following JUMC services.

SCOUTS MUST BE PREPARED FOR COLD WEATHER CONDITIONS.

*Uniform requirements:* Class B uniforms must be worn for troop travel and Class A's are required for Sunday's Scouts Own Service.

**PLEASE FILL OUT THIS FORM AND RETURN THE BOTTOM SECTION WITH MONEY TO THE TROOP MEETING DESIGNATED ABOVE. IF YOU DO NOT TURN IN YOUR SLIP AND MONEY AT THAT TIME, YOU WILL NOT BE ABLE TO PARTICIPATE IN THIS ACTIVITY! Please fill out a separate slip for each scout**

KEEP THIS PART FOR YOUR REFERENCE.

## BOY SCOUT TROOP 809 - PERMISSION SLIP

I hereby give permission for \_\_\_\_\_ to attend the Troop camping trip on March 16,17,18 2018 to the Rodney Scout Reservation for a weekend of camping, backpacking, and shotgun shooting in NorthEast MD.

**IN CASE OF EMERGENCY:** I understand that reasonable effort will be made to contact me. In the event that I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment which may include hospitalization, anesthesia, surgery, or injections of medication for my son. I also understand that I am financially responsible for all medical treatment rendered.

I also understand that if my son becomes too disruptive or does not follow the rules and guidelines set forth by the troop leaders, I will be contacted by the adult leader in charge and required to drive to the camp and pick the Scout up.

LIST ANY MEDICAL CONDITION OR FOOD RESTRICTION WHICH SHOULD BE MADE KNOWN TO THE ADULT LEADER IN CHARGE OR TO MEDICAL PERSONNEL IN ATTENDANCE IN THE EVENT OF EMERGENCY TREATMENT. IF YOUR BOY IS REQUIRED TO TAKE MEDICATION DURING THIS ACTIVITY, NOTE ON THE REVERSE SIDE OF THIS SHEET AND DISCUSS WITH THE GROUP LEADER.

ON THE DATE OF THE EVENT, I CAN BE REACHED AT THE FOLLOWING TELEPHONE NUMBER(S):

SAT: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

SIGNED BY PARENT OR LEGAL GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

I CAN NOT PROVIDE TRANSPORTATION TO FROM OR BOTH .

# OF BOYS (INCLUDING MY SON) THAT I CAN TRANSPORT WITH SEAT BELTS: \_\_\_\_\_

NAME OF ADULT(S) attending: \_\_\_\_\_

*March campout*

NAME OF SCOUT \_\_\_\_\_ NAME OF ADULT \_\_\_\_\_

CAMPING COST: \$11.00 / PERSON \$ \_\_\_\_\_

FOOD COST: \$15.00 / PERSON \$ \_\_\_\_\_

TRAVEL COST: \$11.50 PER SCOUT \$ \_\_\_\_\_  
OR non-driving ADULT\*

\* If you are transporting yourself, this fee is waived

SHOTGUN PROGRAM: \$5.00/ PERSON \$ \_\_\_\_\_

TOTAL COST = \$ \_\_\_\_\_

Payment Method: CASH CHECK SCOUT FUND

# **BOY SCOUT TROOP 809 - PERMISSION SLIP**

Troop 809 policy regarding camping/activity attendance & refunds: If an adult or a Scout is unable to attend this camp out or activity after turning in this permission slip, the Scout (or his parent) or the adult must inform the Scout's Patrol Leader, the Troop Health & Safety chairperson, & the Scoutmaster of the change, as soon as possible. A refund of food cost will be made only if the food for the activity/camp has not yet been purchased by the designated individual(s). A refund of the camping/activity cost will be made only if the related organization/business permits such a refund.

**PLEASE LIST ANY MEDICAL CONDITIONS, MEDICATIONS AND/OR FOOD RESTRICTIONS.**