BOY SCOUT TROOP 809 - PERMISSION SLIP

TRIP: Troop 809 Naval Academy Tour DATE: Campout March 15 - 17, 2019

PERMISSION SLIP DUE: March 10, 2019 Troop Meeting

DESCRIPTION: On Friday March 15th at 6:00 p.m., the troop will meet at JUMC. We will then travel to Downs Park in Pasadena, MD. We will be camping in tents. On Saturday morning, we will travel to the Naval Academy in Annapolis for a tour. All scouts will need money for lunch in the dining hall. On Sunday, the troop will have breakfast and Scouts Own Service, break camp and return to JUMC. ADULT PARTICIPANTS ARE NEEDED FOR THIS CAMPOUT. Uniform requirements: Class B uniform must be worn for troop travel and at the Naval Academy and Class A uniform is 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/person.

KEEP THIS PART FOR YOUR REFERENCE.			
		TROOP 809 - PERMISSION SLIP	
I hereby give permission our Naval Academy tour	forand campout.	to attend the Tro	op Camping Trip on March 15 - 17, 2019 for
permission to the physici		e to secure proper treatment which r	vent that I cannot be reached, I hereby give my nay include hospitalization, anesthesia, surgery, ical treatment rendered.
	my son becomes too disruptive or does arge and required to drive to the camp a	_	et forth by the troop leaders, I will be contacted
PERSONNEL IN ATTENDA		ATMENT. IF YOUR BOY IS REQUIRED	E ADULT LEADER IN CHARGE OR TO MEDICAL TO TAKE MEDICATION DURING THIS ACTIVITY,
ON THE DATE OF THE EV	ENT, I CAN BE REACHED AT THE FOLLO	WING TELEPHONE NUMBER(S):	
SAT: Home:	Cell:	Other:	
SIGNED BY PARENT OR L	EGAL GUARDIAN:	DATE:	
□I CAN □CANNOT PRO	VIDE TRANSPORTATION □TO □FROM	I OR □BOTH	
# OF BOYS (INCLUDING I	MY SON) THAT I CAN TRANSPORT WITH	SEAT BELTS:	
NAME OF ADULT(S) atte	nding:		
 March 2019 Naval Academ	y Tour Campout		
NAME OF SCOUT		NAME OF ADULT	
	CAMPING & TOUR COSTS:	\$12.00	\$
	FOOD COSTS:	\$12.00	\$
	TRAVEL COST: * If you are transporting your so		riving ADULT* \$
		TOTAL COST =	\$
All scouts will need to b	oring money (\$10-15) to purchase lunch	in the dining hall Saturday.	
Payment Method:	□CASH □CHECK #	_ □SCOUT FUND	
Troop 809 policy regarding	camping/activity attendance & refunds: If a	n adult or a Scout is unable to attend this	camp out or activity after turning in this permission

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.

Clear Form

Print Form

E-Mail Form

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PLEASE LIST ANY MEDICAL CONDITIONS, MEDICATIONS AND/OR FOOD RESTRICTIONS.
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PLEASE LIST THE MAKE, MODEL, AND YEAR OF YOUR VEHICLE IF YOU ARE DRIVING.