

Troop 111

Camp Falling Rock Scout & Dad Cabin Campout Permission Form

When: April 1 – 3, 2011

Event: Scout and Dad Campout at Falling Rock.

Departure: Friday, April 1, 2011. Meet at Jerome United Methodist Church at 6:00 PM; departure at 6:15 sharp.

Return: Sunday, April 3: morning. Troop will depart after breakfast.

Cost: \$10 each person (check to Troop 111). This form and payment is due by the March 14th.

Dad is Attending? Yes No

Please use my scout account to cover the cost of this event.

Scout (name) _____ has my permission to attend the Cabin Campout at Camp Falling Rock in Newark, Licking County, Ohio, in consideration of the benefits to be derived, and having the full confidence that reasonable precautions will be taken to insure the safety and well being of my son during this outing, I hereby waive all claims against the Troop, and Local Council or their representatives, on account of any accident, illness or other damage that may occur in connection with this trip. My son is in good physical condition, unless I have noted otherwise on this slip:

Parents Authorization:

In the event of an emergency and I cannot be reached by telephone or other reasonable means, I hereby: **(please check one of the following)**

_____ authorize permission for the physician selected by the adult leader in charge of my child

_____ do not authorize permission for the physician selected by the adult leaders in charge of my child

to hospitalize, secure proper anesthesia, other injections, to do surgery, and whatever else appears medically necessary for my child.

Parent's or Guardian's Signature: _____

Address: _____

Home Phone: _____ Cell Phone (s): _____

Insurance information on file with troop OR if new or changed...

Medical Insurance Company: _____

Policy #: _____

Transportation Support: (please check)

_____ I can transport scouts **TO** this event and safely take _____ (number) passengers with seat belts.

_____ I can transport scouts **FROM** this event and safely take _____ (number) passengers with seat belts.

Kind, make and year of vehicle _____ Driver's License Number _____

Date of Birth _____ Liability Insurance each accident/each occurrence _____

Property Damage limit _____

_____ I will attend this event from _____ (dates) as an adult helper.

_____ I can pull trailer to/from this event. Thanks!