

Permission Slip

As the parent or legal guardian of _____, I hereby give my permission for this child to participate in an outing with Troop 210.

Departure Time: _____ **Date:** ___/___/___ **Location**
Return Time: _____ **Date:** ___/___/___

Activity:

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 except for clear acts of negligence or non-adherence to BSA policies and guidelines.

In case of emergency, I can be reached by phone at _____

or _____. If I cannot be reached, please contact

_____ at _____.

Signed: _____ Date: _____
(Parent or Guardian)

Insurance Information

Company: _____

Group Number: _____

Policy Number: _____

Medication this scout is taking _____

Special Instructions for medicine _____

Is the unit leader to carry the medicine? YES / NO (circle one)

Use the back of the form for any additional information that the unit leader may need to know.