

BSA Troop 314

Permission Form

Activity/Location: Summer Camp 2016 – Camp Durant, Summit
Depart Sunday June 19 – Time TBD – Parking lot behind Chipotle
Return: Saturday June 25 – Time TBD - Scout Shed
Food Stop: YES

Travel Details

Class A Uniform is required for travel, including appropriate pants (dark green, khaki or other dark shorts/long pants)

Scoutmaster in charge: **Bill Campbell 919-413-7715 (cell)**

(keep the top section for reference, if needed)

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My son(s) _____ will attend this activity. To the best of my knowledge my son(s) is/are in good health and may engage in all activities during the outing, except as noted below. In the event I cannot be reached in an emergency, I hereby give permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injections, surgery or provide other necessary medical care for my son.

Exceptions to activities: _____

Allergies: _____

Medication Required: _____

Emergency Contact: _____ Phone: _____

Emergency Contact Relationship: _____

Parents Signature: _____ Date:

Parents Name: _____

Check the box if you will be attending this activity?

**This form MUST be completed and returned PRIOR to the Departure Time.
NO FORM – NO TRIP**