

Scout/Sibling/Friend Permission Slip

Departure Time:	10:00 AM	Date:	08/09/04	<u>Location</u>
Return Time:	?	Date:	08/09/04	All American Towing
Activity:	Twins VS Oakland			Mpls Metrodome

This event is open to family members and friends. If your scout, or scout's sibling, brings a sibling or friend; an adult family member (21 or older) must attend to take responsibility for the extra non-scout person.

Troop 4 Scout Cost: \$10.00. All Others \$20.00 Payment due by July 19th.

All Minors attending must have a signed permission slip.

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As the parent or legal guardian of _____, I hereby give my permission for this child to participate in the following outing with Troop 4:

Day Trip to Twins VS Oakland, MPLS Metrodome 8/09/04

Depart: All American Towing 10:00 AM

Arrive Home: All American Towing ? pm

It is understood that he will be under the supervision of the Scoutmaster or his authorized representative.

I give my permission to the officers, leaders or agents of the Boy Scouts of America, Twin Valley Council, Great Bend District, Troop 4 to obtain and administer such medical aid or assistance as may be required for the care of our son/daughter in the event that such care becomes necessary. It is further understood that such permission will include the administration of such medicines or treatment as might be ordered or rendered by a duly licensed Physician of Minnesota or State in which the above event occurs. 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.

In no event will the Boy Scouts of America, Twin Valley Council, its official leader or agents be held liable for any first aid rendered or treatment with drugs, medicines, or surgical procedures performed pursuant to this consent. We 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.

No Contraband items will be allowed at any Troop 04 outing. Scouting Uniform must be worn to and from the outings.

Signed Scout: _____

Signed Scout Friend: _____

Signed Responsible Adult Attending (for siblings and/or friends):

Adults Please Check:

I will ___ I will not ___ be able to help drive if Necessary. ___ Scouts will fit in my vehicle with functioning seat belts.

I will ___ will not ___ be staying for the activity.

___ Check here if fee to come out of Scouts Troop Account.

Scout \$10.00 All Others \$20.00 Due by: _7/19/04

Signature
Parent/Guardian: _____

Print Name: _____

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)