

TROOP 100, BOY SCOUTS OF AMERICA
WESTBOROUGH, MASSACHUSETTS
Camping Trip Permission Slip

Authorization

I, the undersigned, as parent or legal guardian of _____ hereby permit my son to participate in a trip from: _____ to _____. The troop will meet at the Harvey Building on Friday at 6:15 PM and leave shortly thereafter. We will return to the Harvey building Sunday morning.

I also authorize the available adult leadership to make any decisions concerning the safety and well-being of my son; and to perform and/or authorize medical personnel to perform any medical treatment on my son which may be necessary due to an accident or emergency which may occur in the event of an emergency, or if I cannot be contacted as indicated below.

Signed: _____ Date: _____
(parent or guardian)

Telephone numbers at which I may be reached in the event of an emergency.

Phone 1: (_____) Phone 2: (_____) _____

Check all that Apply:

- Parent will be able to attend the trip.
- Parent will drive on Friday.
- Parent will drive on Sunday.

Name of Parent or Guardian (Driver) _____

My vehicle can carry _____ scouts. This number includes my son.

My vehicle year/make _____ Driver mobile phone: (_____) _____

Please note: The Troop considers you a driver if the information above is checked. You will receive a call if your services will not be needed. Thank you for your assistance in providing transportation and adult leadership on trips.

Medications

List any and all medications, dosage/frequency and specific instructions below. If additional information is needed, add to the reverse side of this form.

Medication _____ Strength _____ Frequency _____ Approximate date started _____ Reason for medication _____ Instructions _____ _____ _____	Medication _____ Strength _____ Frequency _____ Approximate date started _____ Reason for medication _____ Instructions _____ _____ _____	Medication _____ Strength _____ Frequency _____ Approximate date started _____ Reason for medication _____ Instructions _____ _____ _____
---	---	---