

Troop 90 Permission Slip

Activity: INDOOR CAMP AT INDIAN MOUNDS RESERVATION
Date: JANUARY 8-10, 2016
Adult Leader: MR. MACHACEK
Departing from: BROOK PARK SCHOOL at 6:00 PM
Return to: Boy's homes at Noon
Cost: \$30.00 **Dads must pay too**
Transportation: CAR - Drivers needed
Each boy is to bring: Follow equipment list
During this activity: Mrs. Towner will receive emergency calls at 708-751-1745

At the discretion of the adult leaders in charge, if there is any serious discipline problem with a scout during this activity, the parent of the scout involved will be called and instructed to pick up his or her son immediately.

Permission slip must be returned by: **DECEMBER 16, 2015**

My son: _____ has my permission to attend
Campout at INDIAN MOUNDS on January 8-10, 2016

I understand the cost will be \$30.00 **Dads must pay too**

He should be restricted from _____

He is susceptible (or allergic to) _____

In case of emergency phone _____

The person here described has permission to participate in all prescribed activities, except as noted. 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, or order injection or surgery for my son.

Signature _____ Date _____

I will drive and camp with the troop Yes _____ No _____