

Troop 90 Permission Slip

Activity: Swimming Night at RB High School
Date: Monday, January 25, 2016
Adult Leader: Mr. Machacek
Departing from: Meet at RBHS - New entrance on Golf Road at 8:15 PM
Return to: Lasts till 10:00 PM
Cost: None
Transportation: Supply your own transportation
Each boy is to bring: Bathing suit, towel, lock for locker
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: Bring with you on Jan. 25th

My son: _____ has my permission to attend
Swim Nite on January 25, 2016

I understand the cost will be None

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 _____