

Parents Permission Slip & Equipment Check List
Boy Scouts of America - Troop 1610 - Royal Oak, Michigan

Dear Parents:

Troop 1610 is planning an overnight trip to: Camp Rotary for 2008 Summer Camp

The camp is located at: Clare, MI We will sleep in (tents) (~~cabins~~)

The trip will start: Sunday 7/27/08 9:00 AM returning: Saturday 8/2/08 12:00-2:00 PM

Cost of trip will be: Scout - \$240 payment plan Leader in charge: Mark Pitchford/ASM (name/position)
Adults - \$60 payment plan

There (will) (~~will not~~) be open swim times for Scouts whose parents approve.

Equipment needed checked below:

See packing list in Summer Camp packet from parent meeting

Other: No electronic devices (video games, dvd players, etc.) will be allowed in camp. Adults are allowed to have cell phones for contact/emergency needs. No lighters, lighter fluid, or matches are to be brought into the camp by the scouts.

Food as follows: Eat Breakfast before arriving Sunday. All other food will be provided.

Signed: _____, Committee Chairman

Fill in below, detach & return to Unit Leader

Scout: _____ has permission to go on the trip scheduled

for 7/27/08 to 8/2/08 to Camp Rotary (~~not~~) including swimming.

in consideration of the benefits to be derived, we expressly waive all claims against the Troop and Local and National Council, or their representatives, on account of any accident, injury, illness, or other damage that may occur in connection with, or incident to, this trip. He is in good physical condition, unless otherwise noted on this slip, as based on recent information from a physician.

We agree to the following terms and conditions. We will be responsible for any costs incurred by the Troop caused by the actions of above named Scout if these actions were in violation of Troop policy, rules established by leaders, or the result of breaking any Civil laws that might be applicable. In the event that his behavior does not comply with Troop policy, or is disruptive on this outing, we will immediately pick him up from the destination of the outing, or other location as directed to do so by the Adult Leader in charge, or Designated leader Assistant. Should it be necessary to send the Scout home, and I am unable to be reached to pick him up, we agree to be responsible for any costs associated with his return as may be considered reasonable by the Adult Leader in charge, and the Troop Committee Chairman.

In the event of an emergency, or if transportation home is required, please contact:

Name: _____ Address: _____ Phone: _____

Alternate Name: _____ Relationship: _____ Phone: _____

Medical Insurance Co: _____ Policy: _____

Dad will attend: ___ Yes; ___ No. Dad will drive: ___ Yes; ___ No.

Scout's Signature (required): _____

Parent/Guardian Signature (required): _____