

## PERMISSION SLIP FOR PACK OUTINGS

Dear Parent or Guardian,

This form is required for all pack trips. No boy may go on a trip without providing this form prior to travel. The Scout leaders and I will do everything in our power to protect your son. Two adults will be present at all activities. At least one trained adult will be present on all trips.

Yours in Scouting,

-----  
I hereby give permission for my son to be transported by the Scout Leader, or his designee,  
from:  
to:

Permission is valid for (trip dates):

I understand that transport vehicle operators must be over 21 years of age, have a valid driver's license, and have proof of insurance. Scouts will be required to use seat belts at all times of travel.

In consideration of the benefits to be derived, and in view of the fact that Boy Scouts of America is an educational institution, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety of my son on this activity, I hereby agree to his participation and waive all claims against the leaders of this trip and officers, agents and representatives of Boy Scouts of America.

### **MEDICAL EMERGENCY**

In case of medical emergency, I authorize \_\_\_\_\_, or his designee to act on my behalf. It is understood that this release is only valid if authorities are unable to contact parents or guardians.

Signature of Parent or Guardian \_\_\_\_\_ Print Name \_\_\_\_\_

Scout's Name \_\_\_\_\_

Address/City \_\_\_\_\_

-----  
Home Telephone \_\_\_\_\_ Emergency Telephone \_\_\_\_\_

Please list any conditions which apply to your son:

Allergies: \_\_\_\_\_ NO \_\_\_\_\_ YES, describe \_\_\_\_\_

Sensitivity, reaction to medication, drugs: \_\_\_\_\_ NO \_\_\_\_\_ YES; describe \_\_\_\_\_

Limitations of physical activity: \_\_\_\_\_