

TROOP 93 ACTIVITY PERMISSION FORM

Campout Dates From: 5 / 3 / 2002 To: 5 / 5 / 2002
Location: Arborland Spring Camporee at Pawnee Lake State Recreation
Departure Date: 5 / 3 / 2002 Departure Time: 6:00 p.m.
Departing From: Southgate United Methodist Parking Lot
Return Date: 5 / 5 / 2002 Return Time: Before 12:00 p.m.
Return To: Scout's Home
Detach here and return to Scout Master no later than: 4 / 18 / 2002

(Keep the top portion so you know where your son is for this activity)

(Return the bottom portion on or before the date above so your son can go on this activity)

Scout _____ ☐ Has our permission
☐ Will not be able

to attend: Arborland Spring Camporee at Pawnee Lake State Recreation

campout from: 5 / 3 / 2002 To: 5 / 5 / 2002

Remarks:

The person above has permission to engage in all prescribed activities, except as noted above by me. 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 to order injection.

I will be able to provide transportation for _____ scouts to the campout. _____

I will be able to provide transportation for _____ scouts from the campout. _____

I will be able to attend the campout. _____

Signature: _____ Date: / /

Phone (home): - (work): -

Alternate Contact: _____

Phone (home): - (work): -

Cost - Food \$7.00 Other \$7.00 Total \$14.00 **Cash or Check #**

Additional Notes: Any adults wishing to go, you are welcome! Please let us know.

Please read next page