



# Boy Scout Troop 367

## Activity Form / Permission Slip



TRUSTWORTHY –LOYAL –HELPFUL –FRIENDLY –COURTEOUS –KIND –OBEDIENT –CHEERFUL –THRIFTY –BRAVE –CLEAN –REVERENT

Activity:

Location:

Depart Date and Time:

- Christ Episcopal Church

Return Date and Time:

- Christ Episcopal Church

Trip Leader: \_\_\_\_\_

Contact Info: H \_\_\_\_\_  
C \_\_\_\_\_

Cost:

-----

RETURN THIS HALF WITH PAYMENT TO THE TROOP

Informed Consent Agreement

Scout Name: \_\_\_\_\_

Date: \_\_\_\_\_

Activity:

Location:

As the parent or legal guardian, I hereby give my permission for my son to participate in the above named activity with Boy Scout Troop 367. I understand that participation in Scouting Activities offered through Boy Scout Troop 367, American Legion Post 367, Old Colony Council and the Boy Scouts of America involve a certain level of risk. I have carefully considered the risk involved and have given my son permission to participate in this activity.

I further agree to hold the above named organizations, leaders and officers blameless for any accidents that might occur during this activity. In addition, I hereby grant the power of short term Guardian and health care agent for my son, to the following adults.

\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Please make checks payable to BSA Troop 367