

Return this at time of departure



## TROOP 52 PERMISSION SLIP

**Event Date:** \_\_\_\_\_

**Event Location:** \_\_\_\_\_

Place of Departure: OLMC Parking Lot. Date: \_\_\_\_\_ Time: \_\_\_\_\_

Place of Return: OLMC Parking Lot. Date: \_\_\_\_\_ Time: \_\_\_\_\_

Contact Information: \_\_\_\_\_

(Scoutmaster/Assistant Scoutmaster)

As the parent or legal guardian of \_\_\_\_\_, I hereby give my permission for him/her  
(Scout Name)  
to participate in an outing with Troop 52.

I give permission to the leaders of the above unit to render First Aid, should the need arise. In the event of an emergency, I also give permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment, as needed. I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing except for clear acts of negligence or non-adherence to BSA policies and guidelines.

Medications: \_\_\_\_\_

When to administer: \_\_\_\_\_

In case of emergency, I can be reached by phone at \_\_\_\_\_ or \_\_\_\_\_. If I cannot be reached, please contact \_\_\_\_\_ at \_\_\_\_\_.

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

(Parent or Guardian)