



Activity Permission Slip – Troop Copy

Activity: Feb 2016 Day Trip – Indoor Rock Climbing

Date: Saturday Feb 6, 2016

Location: Rock Spot Climbing, Lincoln, RI

Cost: \$25.00 per Scout

Due by: Wednesday, Feb 3rd

~ Parent or Guardian Permission ~

As the parent or legal guardian of:

(Scout #1) _____, (Scout #2) _____, (Scout #3) _____

I hereby give my permission for my son(s) to participate in this event as describe above with Troop 44 Mendon (Scouting unit). I additionally give permission to the leaders of the Scouting 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 Scouting 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.

Signed: _____ Date: _____
(Parent or Guardian)

Family Emergency Contact Information

Contact #1 _____ Tel: _____ Relation: _____

Contact #2 _____ Tel: _____ Relation: _____
(Please print clearly)

Adult's Car (if driving):

Make _____ **Model** _____ **Year** _____



Activity Permission Slip – Family Copy

Activity: Feb 2016 Day Trip – Indoor Rock Climbing

Date: Saturday Feb 6, 2016

Location: Rock Spot Climbing, 100 Higginson Ave, Lincoln, RI

Cost: \$25.00 per Scout

Due by: Wednesday, Feb 3rd

Leader in Charge: Jon Neitz Tel: 508-380-2410

Time: 3-5 pm - be there 2:45

Pick up Time: 5 pm Rock Spot

Special Equipment wear comfortable clothing

Emergency Contacts

If an emergency arises during the activity period and you are unable to reach the Troop leader in charge, here are additional contacts that you can use:

Rock Spot Climbing: 401-727-1704
Mary Morano: 508-942-9980
