

BSA TROOP 95 TRIP PERMISSION SLIP AND INFORMATION FORM

WHERE: Location _____

Phone (____) _____ - _____ / _____

WHEN: **LEAVE** Time _____ **RETURN** Time _____

Place _____ Place _____

Eat before arrival. Class A uniform

Eat on the road Class B uniform

WHAT: Base Camp Backpacking _____

WHY: _____

Cost: \$_____ Make check payable to Troop 95
 Bring \$5 for fast food while traveling to campsite.
 Bring \$5 for fast food on return trip.

Additional Details: _____



Return check and permission slip to Scoutmaster no later than:

____/____/____

I, _____, give permission for _____, to
(parent) (scout)

participate in the BSA Troop 95 planned activity to _____

from ____/____/____ to ____/____/____. In case of emergency I understand that every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my son.

_____/_____/_____
(signature of parent or guardian) (date)

Home Phone # Health Ins Co. Insurance ID # Group #

Persons who can be reached in case of emergency:

Name Relationship Phone # Pager/Mobile #

Name Relationship Phone # Pager/Mobile #