



Iroquois Trail Council Boy Scout Troop 67 Scout Activity Permission Slip



Additional information available at the Troop 67 web site: www.scoutingpages.org/us/ny/troop67

Scout or Attendee: _____

May attend the following activity with Boy Scout Troop 67:

What	Iroquois Trail Council Klondike		
Where	Wilson Conservation Club		
When	Friday – Sunday, 15-17 Feb. '08		
Departing	Location: <u>WCC</u>	Time: <u>Friday, 5:00pm</u>	
Arriving	Location: <u>WCC</u>	Time: <u>Sunday, 10:00am</u>	
Cost/Fee	<u>\$15</u>	Paid By: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Take from Troop Account	

- I understand that all the Adult Leaders are registered with the Boy Scouts of America and that every effort will be taken to insure the safety of my Son.
- I understand that there is some risk in any Boy Scout activity and have discussed with my Son the importance of safety and following instructions from Adult Leaders for this activity. I have discussed with my Son that bad and/or dangerous behavior that puts my Son or anybody else in danger will result in him not being allowed to continue with this activity, which may require calling you, his parents to come and pick him up from this activity.
- I understand and have discussed with my son, that whenever he is in a vehicle traveling to or from a Scouting activity, all Boy Scouts are required to wear a seat belt with the belt properly fastened over his shoulder and around his waist.

Print Name _____

Signed _____

Relationship _____

Date _____

- I am willing to drive boys and gear to/from this activity
- I am willing to attend this activity with the Troop

Name(s) _____

Drivers Lic. # _____

Insurance Company & # _____

BSA Adult Youth Protection# _____

(or attach copy of web completion) _____



Cut and keep for your information

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Notes	Eat dinner at home before arriving. We will have a snack at camp Friday night.		

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