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	Royalton Ravine, Gasport Rd., Gasport, NY			
When	Friday – Sunday, 26 – 28 Jan. '07			
Departing	Location: WCC		Time:	Friday, 5:00pm
Arriving	Location: WCC		Time:	Sunday, 12:00pm
Cost/Fee	$15	**Paid By:** [ ]Cash	[ ]Check	[ ]Take from Troop Account

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- 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 picked 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) _____

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Departing	Location: WCC		Time:	Friday, 5:00pm
Arriving	Location: WCC		Time:	Sunday, 12:00pm
Notes	Eat dinner at home before we leave. We will have a snack at camp Friday night.			

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