

BSA TROOP 136 PERMISSION SLIP
Event: Chief Logan Summer Camp July 5 - July 11, 2020
Due: Thursday, May 14th

Trip Date, Location and Cost: Date: July 5 - July 11, 2020 Location: 3600 Scout Camp Road, Ray, OH 45672 Cost: \$280 per Scout Adults are Free	Load, Depart and Return: Load: 12:00 PM Meet at the First Presbyterian Church Depart: 12:30 PM from the First Presbyterian Church Return: 2:00 PM on 7/11 to First Presbyterian Church 2020 Leader's Guide and other information
Attendees: Scout: _____ <input type="checkbox"/> Take from Scout Account <input type="checkbox"/> Check# _____ <input type="checkbox"/> Cash _____ Adult: _____ <input type="checkbox"/> Take from Scout Account <input type="checkbox"/> Check# _____ <input type="checkbox"/> Cash _____ Can you drive? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, how many seats do you have open? _____	
Uniform and other items needed for the event: Field Uniform or Class A uniforms to be worn on the way there and back. We will be sleeping in tents provided by the camp. Packing list for summer camp will be shared in May.	
Permission: As the parent or legal guardian of the Scout listed above, I hereby give my permission for him to participate in an outing with Troop 136. I also acknowledge that photos will be taken and shared on the troop website about our adventures as a troop. We may also use the photos to create videos about our troop activities. I also give permission to the leaders of the above unit to render First Aid should the need arise. In the event of an emergency, I 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. Name: _____ Date: _____	
Emergency Contact: In case of emergency, I can be reached by phone at _____ or _____. If I cannot be reached, please contact: Name: _____ Phone: _____	
Medication: Will your son need to take any medication on the outing? <input type="checkbox"/> Yes <input type="checkbox"/> No Note: Medications are to be in the original container, in a clear zip lock baggie with Scouts name on it and handed to the adult leader responsible for event (Scoutmaster or Assistant Scoutmaster).	

Name of Scout:

Name of Medicine	Dosage?	How often?