

**Troop 111 Permission slip for:
Longview Lake
Jan 18-19, 2013**

Date: Jan 18-19, 2013

Location: Longview Lake.

Time and Place of Departure: Friday, Jan. 18 @ 6:00 PM, Saint Sabina Gym

Time and Place of Return: Saturday, Jan. 19 @ 9:00 PM, Saint Sabina Church

We will be camping at Longview Lake. The campout will focus on TB District Klondike. Please provide your son with a number so he or the leaders can contact you in case of emergency or change of plans.

Activity:

 TB District Klondike

Contact:

 Mr. Petznick (816) 308-8879

Date: Jan 18-19, 2013

Location: Longview Lake.

Time and Place of Departure: Friday, Jan. 18 @ 6:00 PM, Saint Sabina Gym

Time and Place of Return: Saturday, Jan. 19 @ 9:00 PM, Saint Sabina Church

As the parent or legal guardian of _____, I give my permission for him to attend a Boy Scout campout at Longview Lake and to participate in TB District Klondike with Belton Troop 111.

I give permission to the leaders of the Troop 111 to render First Aid, should the need arise. In the event of an emergency, I also give permission of 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.

In case of emergency, I can be reached by phone at _____ or

_____. If I cannot be reached, please contact:

_____ at _____

Signed: _____ Date: _____

(Parent or Guardian)

\$20 FEE PAID? Y N
