

\*\*\* PLEASE FILL OUT ALL FOUR PARTS OF FORM \*\*\*

# Troop 111 Activity Parental Permission/Release Form

Event: \_\_\_\_\_  
Date/time: \_\_\_\_\_  
Place: \_\_\_\_\_

1. My son/ward \_\_\_\_\_ has my permission to participate in the above Troop 111 activity. In the case of injury or illness, I authorize Troop 111 to render emergency first aid and/or seek all necessary medical attention for my son. In such cases, I understand that I will be notified as soon as possible. I agree to hold harmless and blameless the leadership of Troop 111 (including members of Troop 111's committee and any adults participating in or providing assistance to the activity) and St. Agnes Parish in the event of any injury or illness resulting from participation in this activity. I waive all rights to any civil action against the above mentioned parties. I have noted any medical or other special consideration on the Troop 111 Emergency Medical Treatment Form; if my son has had any serious illness, injury, or medical treatment over approximately the last 6 weeks of which the Troop should be aware, I have provided the details on the upper half of the back of this permission slip (check here if applicable: \_\_\_\_). I understand that a medical clearance or doctor's note may be required prior to participation.

\_\_\_\_\_  
(Signature of Parent or Guardian) (Date)

2. If you will not be home or at work during this event, please list an emergency telephone number through which you can be reached (and the contact person at that number):

\_\_\_\_\_  
(Number) (Contact person)

3. Please remember that the Troop needs/expects parents to attend and/or drive for at least one of every three events their sons attend to provide adequate transportation and supervision. Please fill in one of the following:

(A) \_\_\_\_\_ (name of adult) will attend this event and \_\_\_\_ will drive or \_\_\_\_ will not drive own car;

(B) \_\_\_\_\_ (name of adult) will drive \_\_\_\_ TO or \_\_\_\_ FROM or \_\_\_\_ BOTH WAYS but will not stay; or

(C) \_\_\_\_\_ we cannot attend or drive for this event.

If driving, I will drive a \_\_\_\_\_ (type of car) with \_\_\_\_ (number) seatbelts (including driver).

4. Estimated cost is \$ \_\_\_\_\_/per person CHECK \_\_\_\_ (attach check payable to Troop 111)  
payment option: TROOP CREDIT \_\_\_\_ (only with positive balance!)

– Please sign and return to Scout meeting TWO Mondays before event –