

*** PLEASE COMPLETE ALL FOUR PARTS OF FORM ***

Troop 111 Activity Parental Permission/Release Form

Event: **Shakedown Trip—Philmont Trek Training**
Date/time: **Friday 6/15/07, 3:30 pm, to Sunday, 6/17/07, 3:00 pm (est.)**
Place: **Appalachian Trail near Snickers Gap (Route 7)**

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** CHECK _____ (attach check payable to Troop 111)
\$35/attende; TROOP CREDIT _____ (only with positive balance!)
payment option:

- Please sign and return directly to Dr. Bob or ASM Rick Wolff -

Please read!! -- Detach here for important information below -- Please read!!

AT Shakedown Trip, Friday 6/15/07 3:30 pm to Sunday 6/17/07 3:00 pm (est.)

This is a mandatory activity for the participants in the 2007 Philmont trek. Assemble at 3:30 on Friday with backpack and complete Philmont gear (wear one set of hiking clothes). We will drive out to Snickers Gap (where Route 7 crosses the Appalachian Trail) and hike about 1.5 miles on the AT to an overnight camp. Saturday and Sunday will be hiking and camp set-up to simulate Philmont conditions. This is an intense Philmont training hike to use the group hiking and camping skills taught on the first shakedown. We will return approximately 3 pm Sunday; after cleanup, Scouts should attend 5 pm Mass at the Cathedral or 6 pm Mass at St. Charles.

Fix your deficiencies from the C&O trip and follow the plan!! Leave PLENTY of room in your pack for your share of the crew gear and food. Gear will be reviewed again! Assistance needed for crew gear pack-up and pre-load at 7 pm on Thursday 6/14; trekkers bring their personal gear on Friday. Contact LP Scout for the trip Jack Swallow with questions or to volunteer for crew gear preloading at: Rev_Enge@juno.com.