



TROOP 122 - BSA- CAMPING/ACTIVITY-



CAMPOUT/ACTIVITY: Troop Swim at Dosil's

DATES: 8 Jan 2017 Time: 12:30 – 2:30

(If scout cannot attend form must still be returned with reason for absence)

FORM MUST BE RETURNED BY: 22 Dec 2016 (email or put in Mr Davis' mailbox by 1 Jan)

PERMISSION AND WAIVER

Yes, I give permission for my son: _____ **to participate in the campout/activity listed above. I understand my son may be involved in physical activities such as athletics, games, climbing, hiking, swimming, boating, running, crafts & competitions & may be cooking, making campfires & using camping tools. I relieve Troop 122, the BSA, the attending adults & the Scoutmasters,(who are all volunteers), of legal responsibility, waive all claims against them & give them permission to administer first aid or obtain doctor, emergency medical service or hospital medical treatment for my son. I agree that all medical bills will be paid by me and my spouse.**

Signature of Parent / Guardian: _____ **Date** _____

No, my son is unable to attend because (Give Specific Reason): _____

Yes, if the type of campout/activity permits and there is room, I _____ **would like to attend. I agree to drive (See Transportation), help the adult leaders and follow the Troop Program.**

CURRENT MEDICAL INFORMATION-MUST BE FILLED IN

My son has the following medical conditions that need attention/medication (Please include instructions):

Allergies? Please List: _____

Can Tylenol or Benadryl be given for minor things like a cold, headache, toothache, sore muscles? Yes ___ No ___

In the event of an Emergency contact: _____ Phone #: _____

TRANSPORTATION

Transportation to and from Dosil's is the responsibility of the scout.

Dosil's Scuba, Swim, & Surf
261 Route 36
Middletown, NJ 07748

Any questions, please contact Mr. Davis

Mobile: (917) 693-9261

eMail: stjw35@aol.com

Home:

161 Seabird Lane
Belford, NJ 07718

Last day form will be accepted is 1 Jan 2017