

Boy Scouts of America - Troop 534 "Hey!" Field Trip Permission Form

I understand that the Boy Scouts of America (BSA) is a voluntary educational institution. Many benefits are derived. During this field trip, every precaution will be taken to ensure the safety and well being of my son(s). In consideration of these benefits, I hereby agree to their participation and waive all claims against the leaders, officers, agents, and representatives of BSA. I hereby give my permission for my son(s)

	First Name (print)	Last Name (print)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

to participate in this trip and all related activities on the trip with Chicago Area Council BSA Troop 534 to

Start date: _____ End date: _____

Contact Information

In the event of emergency, I will be available at one of the following phone numbers for the duration of the field trip:

Home: () _____ Mobile: () _____ Work: () _____

Medical Information

I would advise Troop 534 Scoutmaster, Mr. Eddie L. Banks Sr., and other adult leaders of Troop 534 of the following medications, allergies, or medical conditions that apply to my son(s):

(Please include frequency of administering medication and dosage if applicable.)

In the event of an emergency the Troop 534 leadership [has | does not have] **(circle one)** my permission to obtain treatment for my son at the nearest hospital or doctor, at my expense, if the boy's personal physician is unavailable. The phone number(s) where I can be contacted during this trip are:

Medical Insurance Company: _____ Policy Number: _____

Electronics

I understand that neither Troop 534 nor the Boy Scouts of America are responsible for the loss, damage or theft of electronic items (such as radios, mobile phones, video games or other electronic devices) that travel on the Scout's person or in baggage. Therefore, it is in the Scout's best interest to leave such items at home.

Signatures

Parent's Signature: _____ Date: _____

Scout's Signature: _____ Date: _____