Permission Slip

Activity: Camping Camp Raven Knob Departure Time: 8:00 AM Date: 07/19/09 Bi-Lo parking lot Return Time: 12:30 PM Date: 07/25/09 Unity Presbyterian Church Lunderstand that participation in Scouting activities involves a certain degree of risk. I have carefully considered the risk involved and have given consent for myself or my child to participate in these activities. I understand that participation in the activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation. Location Location Camp Raven Knob Date: 07/19/09 Bi-Lo parking lot Unity Presbyterian Church Linderstand that participate the participation in these activities and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation. Location Location Location Camp Raven Knob Date: 07/19/09 Bi-Lo parking lot Location to the participation in these carefully considered the risk involves. I understand that every effort will be made to know of medical situations that might require special consideration for the safe conducting of Scouting activities. In case of an emergency contact person. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for me or my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant's ability	As the parent or legal quardian of				, I hereby give my permission for this child to participate in	
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