

PARENT PERMISSION FOR UNIT ACTIVITY AWAY FROM NORMAL MEETING PLACE  
Eagle Cave due November 8

Unit \_24\_ is planning an overnight trip to Eagle Cave in WI (see [www.Eagle-Cave.net](http://www.Eagle-Cave.net))  
\_\_\_\_\_ on **Friday, Dec 14**  
(date)

We shall leave from Riverside Presbyterian Church \_\_\_\_\_ at **5:30 PM** \_\_\_\_\_ and  
(time)

return to Riverside Presbyterian Church \_\_\_\_\_ at **12:00 PM Sunday, Dec 16**  
(time)

Adult Leader in charge will be **TBA**

Transportation will be by **Van and car** \_\_\_\_\_

Cost per boy **\$55** due with permission slip by Thursday, Nov 8

Each boy is to bring a mess kit, sleeping bag, appropriate clothing, drop cloth, flashlight,  
plastic bag for dirty clothes, extra clothes  
\_\_\_\_\_

We need parents! We don't know how many until we know how many boys are going. Please  
indicate if you can come, or call Pat Rohm.

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(tear off and return this portion)

My son \_\_\_\_\_ has permission to attend \_\_\_\_\_  
\_\_\_\_\_ on \_\_\_\_\_

I understand the cost will be **\$55**. I will be certain my son is feeling well before permitting him  
to attend.

He should be restricted from: \_\_\_\_\_

He is susceptible ( or allergic ) to: \_\_\_\_\_

In case of emergency, phone: \_\_\_\_\_

Yes, I can drive \_\_\_ My car holds \_\_\_ people.

PARENTS AUTHORIZATION

The person herein described has permission to engage in all prescribed activities, except as  
noted by me. In the event I cannot be reached in an emergency, I hereby give permission to  
the physician selected by the adult leader in charge to hospitalize, secure proper anesthesia,  
or to order injection or surgery for my son.

Signature \_\_\_\_\_ Date \_\_\_\_\_

SCOUT SIGNATURE

I acknowledge that the purpose of this outing is for scout activities. I will  
cooperate with troop leaders and patrol leaders.

Signature \_\_\_\_\_ Date \_\_\_\_\_