DES PLAINES VALLEY COUNCIL **BOY SCOUTS OF AMERICA**

PARENT PERMISSION FOR UNIT ACTIVITY AWAY FROM NORMAL MEETING PLACE

Eagle Cave due January 7, 2010

Unit _24___ is planning an overnight trip to Eagle Cave in WI (see www.Eagle-Cave.net) on Friday, Jan 15
We will leave from Riverside Presbyterian Church at 5:30 PM and return to Riverside Presbyterian Church at 12:00 PM on Sunday, Jan 17

Adult Leader in charge will be Gary Olszewski

Transportation will be by van and car

Cost per boy $55 due with permission slip ***by Friday, January 8, 2010***

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/email Lisa Buffo 387-1248/mlbuffo@netzero.net. During this activity Lisa Buffo will receive emergency calls.

(tear off and return this portion)

My son _____ has permission to attend Troop 24's outing to Eagle Cave on January 15-17

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.

PARENT 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_____