

RETURN THIS PORTION IF ATTENDING THIS ACTIVITY

**PERMISSION SLIP  
TROOP 1381**

IN CONSIDERATION OF THE BENEFITS TO BE DERIVED, AND IN VIEW OF THE FACT THAT THE B.S.A. IS AN EDUCATIONAL ORGANIZATION, MEMBERSHIP IN WHICH IS VOLUNTARY, AND HAVING FULL CONFIDENCE THAT EVERY PRECAUTION WILL BE TAKEN TO ENSURE THE SAFETY AND WELL BEING OF MY SON DURING THIS TRIP AND DURING THIS ACTIVITY.

I \_\_\_\_\_ GIVE MY PERMISSION FOR MY SON(S) \_\_\_\_\_, TO ATTEND A WEEK TENT OUTING FROM JULY 18th, 2009 THRU JULY 25th, 2009. I HEREBY AGREE TO THEIR PARTICIPATION AND WAIVE ALL CLAIMS AGAINST THE LEADERS OF THIS ACTIVITY AND TRIP AND OFFICERS, AGENTS AND REPRESENTATIVES OF THE B.S.A.

SCOUTS NAME \_\_\_\_\_ DATE \_\_\_\_\_

PARENT (GUARDIAN) SIGNATURE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ ALTERNATE PHONE \_\_\_\_\_

Is parent (guardian) planning to attend this event? yes \_\_\_\_\_ no \_\_\_\_\_

Is parent able to drive to and from camp? # of seatbelts (include self) \_\_\_\_\_

Name of adult attending (please print) \_\_\_\_\_

**Bring mess kits? YES!! D-Bar-A is going green!!**

-----  
DETACH AND KEEP THIS PORTION FOR REFERENCE

ACTIVITY: Summer Camp D-Bar-A

PHONE: (810) 678-2130– EMERGENCY ONLY

WHEN: July 18th 2009 thru July 25<sup>th</sup> 2009

COST: Paid

CONTACT PERSON Jacques Ledent Home: 313-381-5323

Cell: 313-212-5730

LEAVE ON: July 18th TIME: 2:00 PM

WHERE: PARKING LOT BEHIND OLD CVS DRUGS FORT & EMMONS

RETURN ON: July 25th TIME: Approx. 12:00 p.m.

**Return this permission slip at the picnic or on July 18th when leaving for camp.**

YOUR SON CANNOT GO TO CAMP WITHOUT A

**SIGNED PERMISSION SLIP & MEDICAL FORM.**