

Fall 2007 Backpacking trip
Oct 19th,20th returning the 21st

Troop 880 Oct A.T. Backpack
Permission slip

- Appalachian Trail Hike Permission Slip
- This form must be completed and returned before Oct.16th .
- Scout _____ has my permission to attend the Fall Appalachian Trail hike on Oct. 19th ,20th ,21st with Scout Troop 880 at the October Mountain area of Mass..
- Emergency medical treatment is authorized in case parents can not be contacted. Phone numbers where parents may be reached in an emergency during the trip. (____)- _____.
- We will be meeting at church at 5:30 pm on Friday Oct.19th and returning about 2 pm Sunday the 21st of Oct. Everyone should eat dinner before arriving at the church Friday night. We will not be stopping along the way.
- This trip is patrol cooking. The patrol or individuals will be responsible for purchasing their food and planning for Saturday breakfast, lunch & dinner and breakfast on Sun.
- Will Scout be bringing any medications or inhalers? Yes____ No_____
- Please provide name of medications / inhalers _____. All medications need to be in original container and handed to Scout leader by parent.
- _____ I can drive____ I have room for_____ scouts including gear.
- _____ I will be attending as an adult leader
- Cost: \$8.00 per person. Food not included.
- Name of Parent _____ Signature _____ date _____
- Hand in or mail to Mr. Maneeley 326 Quarrybrook Drive S. Windsor, CT. 06074