

Troop 880

Orienteering Weekend

Permission slip

April 26th & 27th

- This form must be completed 4/20/08
- Scout _____ has my permission to attend the April Orienteering trip at Hurd State Park located at East Hampton, CT. April 26, 27.
- Emergency medical treatment is authorized in case parents cannot be contacted. Phone numbers where parents may be reached in an emergency during the trip. (____)-_____.
- We will be meeting at church at 1pm on Saturday April 26th returning about 3pm Sunday the 27th of April
- 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 for the trip will be 8 dollars per person. This is for camping and maps fees
- Name of Parent_____ Signature_____ date_____
- Present or mail to Mr. Maneeley 326 Quarry Brook Drive S. Windsor, CT. 06074
- I will be out of town April 12th -19th. Please talk to Mr. Jennings or leave me a message at 882-3111 and I will get back to you when I return