

# Fall 2008 Backpacking Trip Permission Slip

Oct 24<sup>th</sup> ,25<sup>th</sup> returning the 26<sup>th</sup>

## Troop 880 Oct A.T. Backpack Permission slip

- Appalachian Trail Hike Permission Slip
- This form must be completed and returned before Oct.20<sup>th</sup> .
- Scout \_\_\_\_\_ has my permission to attend the Fall Appalachian Trail hike on Oct. 24<sup>th</sup> ,25<sup>th</sup> ,26<sup>th</sup> 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.24<sup>th</sup> and returning about 12 pm Sunday the 26<sup>th</sup> 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.
- Short notice cancelation may result in loss of refund
- Name of Parent\_\_\_\_\_ Signature\_\_\_\_\_ date\_\_\_\_\_
- Hand in or mail to Mr. Maneeley 326 Quarrybrook Drive S. Windsor, CT. 06074