



BOY SCOUTS OF AMERICA®



TROOP 135 TRIP PERMISSION SLIP

EVENT:	JDRF Walk for Nathaniel Open to T135 Scouts – Family - Friends		
LEAVING:	Date: 6/7/2015	Time: 8:30am	Brookfield HS
PICK UP:	Date: 6/7/2015	Time: 10:30pm or after BBQ at Varda's House	Brookfield HS at 10:30am or 6 Old Middle Rd after BBQ
Register and Donate at	http://www2.jdrf.org/goto/teamnathaniel	PERMISSION SLIP DUE BY	Date: 6/4/2015
Emergency Contacts at the Event:	Dave Collins	Phone:	914-471-6183

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_____ has my permission to participate in JDRF Walk for Nathaniel June 7th
(Scout Name)

While it is understood that every precaution and care will be exercised on this event, it is understood that the troop, its leaders, committee, or the church cannot be held liable for accidents. Should an emergency arise, my permission is granted to obtain medical treatment and/or care at the discretion of the troop leaders. I will be notified as soon as possible of the incident.

In case medical care is needed, the following is all insurance information needed to file a claim.

Insurance Company _____ Policy # _____

Additional Info. i.e.. employee #, Group # _____

List any allergies/special needs/limitations: _____

List any medications being taken: _____

I may be reached at the following phone number(s) during this trip: _____ Cell _____

If I am unavailable, please contact _____ Phone # _____

Parent Signature

Date