



**TROOP 15 – BOY SCOUTS OF AMERICA  
PERMISSION SLIP**



**SCOUT’S NAME:** \_\_\_\_\_, has my permission to attend, with Troop 15, the following outing:\_\_\_\_\_. I grant permission to the adult leaders to administer first aid or discipline as deemed necessary. I voluntarily release, waiver, and covenant not to sue the Boy Scouts of America, St. Francis United Methodist Church, or the adult leaders of Troop 15 in their involvement in this outing. Furthermore, in the case of emergency, I grant permission for rendering of all emergency medical attention by qualified medical personnel.

Parent or Guardian (Signature) \_\_\_\_\_ Date: \_\_\_\_\_

Parent Attending?  Yes  No

Driving?  Yes  No Number of seat belts in your car for scouts \_\_\_\_\_

During the outing I can be reached at (please give all numbers):\_\_\_\_\_

*Details may change, please have your scout check with his patrol leader prior to departure.  
**Parents, please encourage your scout to participate in each outing!***



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