

**PERMISSION FORM**

I hereby grant permission for \_\_\_\_\_  
to participate in the \_\_\_\_\_,  
under the leadership of Mr. Pat Gerber and/or his assistant scoutmasters. In  
consideration of his engaging in this activity, I agree to save harmless the said leader  
and his associates, out unit's sponsoring institution and the Boy Scouts of America  
because of any claim arising on behalf of my said son(s) from a possible injury or illness  
while engaging in this activity.

The cost will be \$\_\_\_\_\_.

Check # \_\_\_\_\_  Cash  Take From Account

I (Parent/Guardian) \_\_\_\_\_ may be reached at:

\_\_\_\_\_  
Phone Address City, State, Zip

**IN THE EVENT I CANNOT BE REACHED AND EMERGENCY MEDICAL TREATMENT IS REQUIRED:**

YOU MAY CONTACT \_\_\_\_\_ Phone: \_\_\_\_\_  
OR  
YOU MAY AUTHORIZE MEDICAL AUTHORITIES TO PRESCRIBE SUCH TREATMENT.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

**LEADERS ONLY**

- I will attend this event in my capacity as a leader.
- I will provide transportation: TO FROM BOTH. (Circle One)

**Vehicle Information**

Drivers License Number: \_\_\_\_\_

Auto Insurance Carrier: \_\_\_\_\_

Amount of Liability: Per Person \_\_\_\_\_,000 Per Accident \_\_\_\_\_,000 Property Damage \_\_\_\_\_,000

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Number of available passenger seat Belt: \_\_\_\_\_

**PARENTS** (BSA Youth Protection Training is MANDATORY. Date Completed \_\_\_\_\_)

- I can assist with transportation, if needed: TO FROM BOTH (Circle One)

Name: \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**NOTE:** *Vehicle Information section (above) must be filled out for vehicle used for transporting scouts.*