

Activity Permission Slip – Page 1 (complete and return)

Activity: Summer Camp at Wente Scout Reservation Activity Date(s): July 19 – July 25, 2015

Authorization for Medical and Dental Treatment and Release (required)

I, the undersigned, am the parent or guardian of (scout name)

Authorization for Adult to Consent to Medical and Dental Treatment under the provisions of California Family Code Sections 6901, 6902, and 6910. I, the undersigned, hereby authorize the adult leaders of BSA Troop 237 to act as my agents to consent to medical care, which includes X-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is rendered under the general or special supervision of a physician or surgeon licensed under the Medical Practice Act of California or under the equivalent laws of another state, and dental care, which includes X-ray examination, anesthetic, dental or surgical diagnosis or treatment, and hospital care by a dentist licensed under the Dental Practice Act of California or under equivalent laws of another state.

Authorization to Release Treated Minor to Adult under the provision of California Health and Safety Code Section 1283(a). I, the undersigned, further authorize the adult leaders of BSA Troop 237 to receive physical custody of this minor upon completion of any treatment. The undersigned specifically instructs any treating health facility to surrender physical custody of this minor to the adult leaders of BSA Troop 237.

Duration of Consents and Authorizations. The above consents and authorizations are effective while the minor is participating in and traveling to or from the activity, or until revoked in writing by the undersigned and delivered to the adult leaders of BSA Troop 237 who are present at the activity. The consents and authorizations given by this document are intended to comply with the requirements of California law and with comparable laws of any other jurisdiction.

Special Considerations or Restrictions:

Parent/Guardian Signature: Date:

Medical, Emergency, and Insurance Information (required)

Allergies & Medical Conditions:

Prescribed Medications:

Insurance Company: Insurance or Military ID:

Emergency Contact: Emergency Phone:

Alternate Contact: Alternate Phone:

Adult Participant Information (if participating)

Adult Participant Name: Trained (yes/no):

Driver and Vehicle Information for Tour Permit (if transporting scouts)

Adult Driver Name: Drivers License: Seatbelt Count:

Year, Make, Model: Mobil Phone:

Insurance Coverage: Each Person: \$ Each Accident: \$ Property: \$

Payment Information

For payment details please see the Troop 237 Flier on the Summer Camp tab, of our Forms page

http://sites.gec-bsa.org/t237/

Activity Permission Slip – Page 2 (complete and return)

Activity: Summer Camp at Wente Scout Reservation Activity Date(s): July 19 – July 25, 2015

Consent to Participate and Hold Harmless Agreement
(separate forms are required for each scout and for each adult participant)

I, the undersigned participant or parent/guardian of (scout name) _____ request voluntarily for myself/scout to participate in the activity listed above sponsored or organized by Boy Scout Troop 237. I consent to my/scout's participation in the activity and acknowledge that the scout and I fully understand that my/his participation may involve risk of serious injury or death, including losses which may result not only from my/scout's own actions, inactions or negligence, but also from the actions, inactions or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, and/or the rules of play of this type of event or activity. I understand that if I have any risk concerns, I should discuss the risks associated with my/scout's participation with the activity coordinators and event staff, before I sign this document and before the activity begins.

I certify that I/scout is in good health and has no physical condition that would prevent participation in this activity. Furthermore, I agree to use my/scout's personal medical insurance as a primary medical coverage payment if accident or injury occurs. Knowing and understanding the risks involved with participation in the activity, I hereby voluntarily and willingly assume responsibility for all risks and dangers associated with my/scout's participation in the activity. I agree I am financially responsible for any losses resulting from my/scout's actions and will indemnify Boy Scout Troop 237, Folsom City Host Lion's Club, and their officers, committee members, leaders, members, employees, agents, volunteers, related parties, or other organizations associated with the activity, and each of them, for any loss or damage caused by myself/scout during this activity.

In consideration of my/scout's participation in the activity, I, on behalf of myself and scout, hereby waive all claims, actions, causes of action, damages and liabilities against Boy Scout Troop 237, Folsom City Host Lion's Club, and their officers, committee members, leaders, members, employees, agents, volunteers, related parties, other organizations associated with the activity, and each of them, arising out of my/scout's participation in the activity and hereby release, hold harmless, and discharge Boy Scout Troop 237, Folsom City Host Lion's Club, and their officers, committee members, leaders, members, employees, agents, volunteers, related parties, other organizations associated with the activity, and each of them, from all liability in connection therewith except such loss or damage which was caused by the sole negligence or willful misconduct of Boy Scout Troop 237, Folsom City Host Lion's Club, and their officers, committee members, leaders, members, employees, agents, volunteers, related parties, other organizations associated with the activity.

I have read this release and hold harmless agreement and understand the terms used in it and their legal significance. This waiver and release is freely and voluntarily given with the understanding that the right to legal recourse against Boy Scout Troop 237, Folsom City Host Lion's Club, and their officers, committee members, leaders, members, employees, agents, volunteers, related parties, other organizations associated with the activity is knowingly given up in return for allowing my/scout's participation in the activity. My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators, and assigns.

Parent/Guardian Signature _____ Date _____

Participant Signature _____ Date _____

Participant Name (print) _____ Phone _____

Participant Address _____ City _____ State _____ Zip _____

Witness Signature _____ Date _____

(witness must be at least 18 years old and present for the above signatures)