



# BSA TROOP 130, MAYNARD, MA SCOUT ACTIVITY PERMISSION FORM



<b>Activity:</b>	Cabin Camping & Snowshoeing Trip
<b>Where:</b>	Camp Hinds, Raymond, Maine
<b>Departure:</b>	Friday, February 8, 2013 at 5:30pm at Fowler School, Maynard
<b>Pick up:</b>	Scouts will be dropped off at their home on Sunday, February 10, 2013 between Noon and 2:00pm.
<b>Cost:</b>	\$50.00 per person. <b>Cash, Check or Scout Account on January 29<sup>th</sup> ONLY. No late sign-ups can be accepted.</b> (We need two weeks for tour permit approval, BSA rules.)
<b>Due Date:</b>	<b>No later than the January 29, 2013 Troop Meeting</b>

This trip will be a winter extravaganza!!! This year we have two cabins reserved at Camp Hinds in Raymond Maine, which regularly has 4 feet of snow on the ground by late winter. We will be staying in the Bates and Cadigan cabins. After breakfast on Saturday we will try out our snowshoes as we tramp around the Maine woods. Then we hit to tubing park and finally end up at a Chinese Restaurant for dinner. We will return to our cabin for an evening of board games, cards, and sleep. We can bring our vehicles right up to the cabin, so you can pack in duffle bags instead of frame packs. Scouts should eat dinner before departing Friday evening and bring change for the rest stop vending machines (both directions).

DETACH HERE - KEEP TOP PORTION FOR YOUR INFORMATION)

## Camp Hinds Snowshoeing Trip Permission Form – 2/8/2013 - 2/10/2013

Although all participants in this activity are supervised, your written permission is required for your Scout to attend. Your Signature relieves Troop 130 and its adult leaders from any liability in the event of an accident.

I give my son, \_\_\_\_\_ (please print full name), permission to participate in the Cabin Camping Trip between Friday night Feb 8, 2013, and Sunday morning Feb 10, 2013 at Camp Hinds, Raymond ME, and to go tubing and snowshoeing on Saturday Feb 9, 2013. I relieve Troop 130 and its adult leaders of any liability beyond normal supervision. I also give permission for my son to receive emergency medical treatment at the nearest hospital, first aid station, or other medical facility in case of an accident or serious illness.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_ Policy ID #: \_\_\_\_\_

Does your son have any known allergies (particularly to bee stings, insect bites or foods)? Please describe.

Does your son take any prescription drug or medications on a regular basis? If yes, please identify by name, dosage, and frequency. **Please note all medications your son will need during this trip must be provided to the Scoutmaster in an original prescription container at the time he is dropped off.** This container will be returned to you at the end of the trip.

Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_ X \_\_\_\_\_ a day.

Does your son have epilepsy, fainting spells, ear infections, asthma, or any other chronic illness that we should be aware of during this trip? Please describe.

Physician's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

List a phone number where you or a responsible family member can be reached in the event of an accident or emergency. This is very important if you will be out of town during this activity.

Contact: \_\_\_\_\_ Relationship to Scout: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Parent Participation** – To run a quality program, we need the assistance of every Scout's family.

Name of Parent Attending: \_\_\_\_\_

***If you can drive for this trip, please fill out the back of this form.***

## Driver and Vehicle Information

BSA regulations are very stringent on how the Troop transports its Scouts. Whenever we travel outside the Knox Trail Council's boundaries we are required to file a tour permit. This permit is the BSA's way of insuring we have adequate supervision and transportation for the trip. A key part of this tour permit process is listing all the vehicles and their drivers. This registration process also extends the BSA's insurance protection to each driver and vehicle.

Driver's Name: \_\_\_\_\_

Auto Registration Number:: \_\_\_\_\_

Year, Make & Model of Vehicle: \_\_\_\_\_

Number of Scouts you can transport (you must have a working seat belt for each Scout): \_\_\_\_\_

Property & Liability Insurance Coverage - (BSA recommends at least \$50,000 & \$50,000/\$100,000, see lines 4 and 5 from your Auto Insurance Coverage Page): \_\_\_\_\_

Recognizing the confidential nature of this material, only the Troop's Trip Coordinator maintains a copy of this information. Each time you transport Scouts on a Trip, this information is recorded on the Troop's Tour Permit filed with the Knox Trail Council. This information is also carefully safeguarded at the Council office and is used only to extend BSA trip insurance coverage to each driver and their vehicle. Please call Bruce Arntzen at (978) 897-3978 or John Newey at (978) 897-1729 if you have any questions.