## NORTHERN TIER HIGH ADVENTURE BOY SCOUTS OF AMERICA

**Parental Release Form** 

Participant's Name:	
Adult Leader's Name:	
Leader's Position:	Unit Number:

As parent or legal guardian of the above named participant, I certify that said person has my permission to attend and participate in the Boy Scouts of America, Northern Tier National High Adventure program. (Canadian border crossing officials prefer the signature on this form to be by the parent or legal guardian <u>not</u> traveling with the youth).

I further certify that the above named participant has my permission to travel in shuttle vehicles or small commercial aircraft to and/or from the expedition location as warranted by the expedition itinerary. I understand that our local Scout Troop or venturing Crew contracts this service.

In the event of emergency or accident, Northern Tier will notify the emergency contact listed on the "Health and Medical Record" form as deemed necessary by Northern Tier management.

Signed:		Date:	
(by parent / legal guardian no	<u>t</u> traveling with youth if possible)		
Name:	Phone Number:		
Address:	City:		State:
Signed:		Date:	
(by second parent / legal guar	rdian)		
Name:	Phone Number:		
Address:	City:		State: