

# CIVIL AIR PATROL CADET ACTIVITY PERMISSION SLIP

## SUGGESTED BEST PRACTICE for LOCAL "WEEKEND" ACTIVITIES:

Announce the activity at least 2 weeks in advance and require participating cadets to sign-up via this form 1 week prior to the event

### 1. INFORMATION on the PARTICIPATING CADET

<b>Cadet Name:</b>	<b>Cadet Grade:</b>	<b>CAPID:</b>
<b>Unit Charter Number:</b>	<b>Activity Name:</b>	<b>Activity Date:</b>

### 2. INFORMATION about the ACTIVITY

<i>For hotel-based activity or conference</i> <b>Grade &amp; Name of Supervising Senior:</b>	<i>For hotel-based activity or conference</i> <b>Supervising Senior initial to acknowledge responsibility:</b>
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### 3. PARENT's or GUARDIAN's CONTACT INFORMATION

<b>Parent or Guardian Name:</b>	<b>Relationship to Cadet:</b>	<b>Contact Number on Date(s) of Activity:</b>
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### 4. OTHER DOCUMENTS REQUIRED to PARTICIPATE

Check those that apply and attach with this form

<input type="checkbox"/> <b>CAPF 31</b> Application for Special Activity	<input type="checkbox"/> Other / Special Local Forms (specify)
<input type="checkbox"/> <b>CAPF 160</b> CAP Member Health History Form	
<input type="checkbox"/> <b>CAPF 163</b> Provision of Over the Counter Medication	

### 5. PARENT's or GUARDIAN's AUTHORIZATION

Cadets who have reached the age of majority, write "N.A."

<i>I authorize my cadet to participate in the activity described above.</i>	<b>Signature:</b>	<b>Date:</b>
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*Disposition:* Units may discard this completed form when the activity concludes.

**Please detach on the dotted line.** The upper portion is for CAP and the lower portion is for the parent's or guardian's reference.

### 6. HELPFUL INFORMATION for PARENTS & GUARDIANS

To be completed by the cadet with assistance from local leaders or activity hosts

<b>Activity Name:</b>	<b>Activity Date &amp; Time:</b>
<b>Activity Location:</b>	<b>Activity</b> <input type="checkbox"/> classroom, tour, light <input type="checkbox"/> backcountry <b>Format(s):</b> <input type="checkbox"/> physically rigorous <input type="checkbox"/> flying
<b>Participation Fee:</b>	<b>Payment Due:</b>
<b>Transportation Provided?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Extra Fee:</b>	<b>Transportation Rally Point:</b>
<b>"High Adventure"?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, explain:</b>	<b>CAP Point of Contact Name:</b> <i>The supervising adult staff is expected to include</i> <input type="checkbox"/> men only <input type="checkbox"/> women only <input type="checkbox"/> men and women
<b>Meals:</b> <input type="checkbox"/> Provided <input type="checkbox"/> Bring own food <input type="checkbox"/> Bring money	<b>Emergency Phone:</b>
<b>Equipment Needed:</b> <input type="checkbox"/> See website or flier for equipment list	<b>Activity Website:</b>
	<b>Estimated Time Returning to Home or Rally Point:</b>