

Permission Slip

As the parent or legal guardian of _____, I hereby give my permission for this child to participate in an outing with Troop 125.

Activity:	Day Trip	Location	Nissequogue River
Departure Time:	8:30 AM	Date:	05/05/13 Paul T. Given County Park- Smithtown
Return Time:	1:00 PM	Date:	05/05/13 Kings Park Bluffs

Experience a canoeing trip down the Nissequogue River. Eat lunch along the river trail. Enjoy the sights of exciting extraordinary wildlife. The river is home to such species as the piping plover, common tern, American black duck, clapper rail, osprey, herons and egrets.

The scenic trip from one end of the river to the other is about a 5 ½ mile journey and takes approximately two - three hours. After a short safety and introduction to the river, we will launch the canoes and or kayaks from the park. Launch time is approximately 9:30 AM. Lunch break is for a 1/2 hour.

No scout will be allowed to leave Sunday afternoon until all troop equipment is secured and all scouts/leaders are accounted for. Your cooperation is greatly appreciated.

Cost: \$45-50.00 Rental includes life vest and paddles. ***final price is dependent upon the number of participants and if we qualify for a group discount***

Note : Eat breakfast before arriving at the Park. Bring a bag lunch for river trail.

The undersigned parent/guardian hereby consents to emergency care and treatment to be given to the above named in the event he shall become ill or involved in an accident. The necessity for such care and/or treatment shall be left to the discretion of the attending physician. The undersigned parent/guardian also agrees to hold harmless registered Scouters of Troop 125 and any other non- registered adults in attendance at the above trip knowing that all necessary precautions for the safety and welfare of the Scouts have been taken.

Troop 125 must be informed of any special medical attention your son needs. If your son regularly takes medication for any medical condition.

The Scout Leader must receive a supply of the medicine in a labeled container with written instructions as to its administration. The Scoutmaster or other trip leader reserves the right, in instances of special medical conditions to require parental attendance on the trip.

SPECIAL MEDICAL INSTRUCTIONS:

WILL A PARENT BE ATTENDING ? (circle one) Yes or No

WILL A PARENT BE DRIVING ? (circle one) Yes or No

SCOUTS DRIVING WITH PARENT (IF KNOWN)

The cost for the above trip will be coming out of my Scout Account \$100

I _____ give permission for \$10-20 being deducted from my scout account to pay for this trip.

Date: _____