

TROOP 229, SELDEN, N.Y.

THE TROOP WILL BE GOING ON A BIKE HIKE AT CATHEDRAL PINES IN MIDDLE ISLAND ON **SATURDAY, DECEMBER 15th**. THE TRAIL IS ABOUT 6 MILES LONG AND IS NOT PAVED. IT IS MEANT FOR OFF-ROAD/MOUNTAIN BIKES.

WE PLAN ON MEETING AT 1-800-FLOWERS ON SATURDAY MORNING AT 9:00AM. THE BOYS SHOULD BRING A LEAVE-NO-TRACE LUNCH AND DRINKS.

WE PLAN ON RETURNING AT ABOUT 1:00PM. THE **COST** OF THE TRIP IS \$5 PER PERSON.

PLEASE COMPLETE THE FORM BELOW AND RETURN TO THE TROOP AT THE NEXT TROOP MEETING. THANK YOU!

YES _____ I HEREBY GIVE _____ PERMISSION TO ATTEND THE DECEMBER BIKE HIKE ON DECEMBER 15TH AT CATHEDRAL PINES IN MIDDLE ISLAND.

NO _____ MY SON WILL NOT BE ABLE TO ATTEND THE BIKE HIKE FROM DECEMBER 15TH, 2007.

DO NOT COMPLETE BOTTOM OF FORM IF YOU OR YOUR SON ARE NOT ATTENDING

I AUTHORIZE ANY MEDICAL TREATMENT THAT MAY BE NECESSARY DURING THIS OUTING. SIGNED _____

HEALTH INSURANCE PROVIDER _____

THE I.D. # IS _____

MY PHONE # IS _____

EMERGENCY PHONE # _____

LIST ANY MEDICATIONS THAT ARE REQUIRED DURING THIS CAMPOUT: _____

CHECK ONE

1. [] I WILL BE ABLE TO CAMP AND PROVIDE TRANSPORTATION FOR _____ SCOUTS.
2. [] I WILL BE ABLE TO PROVIDE TRANSPORTATION FOR _____ SCOUTS ON FRIDAY.
3. [] I WILL BE ABLE TO PROVIDE TRANSPORTATION FOR _____ SCOUTS ON SUNDAY.
4. [] I WILL NOT BE AVAILABLE THIS WEEKEND.

I GIVE PERMISSION FOR _____ TO DRIVE MY SON TO THE CAMPOUT.

PAYMENT BY:

_____ CASH _____ CHECK (CHECK # _____)

_____ SCOUT ACCOUNT

Please fill out and return this form if your son is going or not

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