

TROOP 229, SELDEN, N.Y.

THE TROOP WILL BE GOING ON A HIKE STARTING AT CONNETQUOT STATE PARK AND HEADING NORTH ON THE GREENBELT TRAIL ON **SATURDAY, FEBRUARY 2ND**. THE TRAIL IS ABOUT 6 MILES LONG AND IS NOT PAVED. IT IS RECOMMENDED THAT HIKING BOOTS ARE WORN.

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 ALONG WITH A DAY-PACK.

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
FEBRUARY HIKE ON FEBRUARY 2ND STARTING AT CONNETQUOT STATE PARK BY SUNRISE HWY.

NO _____ MY SON WILL NOT BE ABLE TO ATTEND THE FEBRUARY HIKE ON FEBRUARY 2ND, 2008.

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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