

**TROOP 229, SELDEN, N.Y.**

The Troop will be cabin-camping at Schiff Scout Camp in Wading River from December 10th through December 12th. The purpose of the campout is to have fun, work on rank advancements and build better relationships with your fellow scouts. Since we (Troop 229) are planning our own outing, the schedule is up to the troop. Class A uniform is not required. Class C uniform is required (show scout spirit).

The name of the cabin is Kniffs and it sleeps up to 16 people. If we have more than 16, there are 3 additional lean-tos (wooden structures that are partially open on one side) that fit 4 people each. If we have more than 16 people, we plan on moving people around so everybody can enjoy the opportunity of sleeping in a lean-to and inside the cabin. The cabin is only heated by the wood-burning stove, which means that somebody will need to keep the stove burning all night in order to stay warm.

This is a good opportunity to get to know your fellow scouts better and build better relationships between the patrols.

We plan on leaving from 1-800-FLOWERS in Selden on Friday evening at 6:30 PM. The boys should bring a leave-no-trace dinner and drink for Friday night. We plan on returning home at about 10:00AM on Sunday.

The cost of the trip is \$30 per person (including breakfast, lunch, dinner, dessert and breakfast in addition to the cost for the cabin).

**Please complete the form below and return it along with the payment to Mr. Stern at the Troop meeting on Thursday, December 2<sup>nd</sup>.** If you are not able to attend the Troop meeting, please bring the form and payment to Mr. Stern's house @ 47 Jonas Blvd, Centereach by December 6<sup>th</sup>. We need to finalize all the plans by December 8<sup>th</sup> since this is the due date from Schiff.

YES \_\_\_\_\_ I HEREBY GIVE \_\_\_\_\_ PERMISSION TO ATTEND SCHIFF CABIN CAMPOUT FROM DECEMBER 10-12 AT SCHIFF SCOUT CAMP RESERVATION.

NO \_\_\_\_\_ MY SON WILL NOT BE ABLE TO ATTEND THE OUTING.

**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 (to be completed by an adult)

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/FROM THE CAMPOUT.

PAYMENT BY:

\_\_\_\_ CASH      \_\_\_\_ CHECK (CHECK # \_\_\_\_\_)      \_\_\_\_ SCOUT ACCOUNT

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

This document was created with Win2PDF available at <http://www.win2pdf.com>.  
The unregistered version of Win2PDF is for evaluation or non-commercial use only.