

TROOP 229, SELDEN, N.Y.

The Troop will be attending the 10 Commandment Hike on November 28th in Patchogue. The hike will be about 4 miles and will include visiting 10 houses of worship (Churches and Synagogues). At each house or worship, the clergy will discuss one of the 10 commandments and then ask if there are any questions. During the hike lunch will be eaten at a designated time and place. In the past this has been a fun and interesting day. Typically there are about 1000 scouts hiking through the streets of Patchogue. Check in starts at 8:00AM at Our Lady of Mount Carmel RC Church, 495 North Ocean Avenue, Patchogue 11772. Opening ceremony starts at 9:00AM.

We plan on **leaving** from 1-800-FLOWERS in Selden on Friday morning at 8:00AM. The boys should bring a leave-no-trace lunch and drink.

We plan on returning home at about 2:30PM on Friday.

The cost of the trip is \$7 per person (including a 10 Commandment Hike patch).

Please complete the form below and return to the Troop by Thursday, November 13th (at the Troop meeting). We need to finalize our numbers by 11/17 or it will cost more.

YES _____ I HEREBY GIVE _____ PERMISSION TO ATTEND THE 10
COMMANDMENT HIKE ON NOVEMBER 28 IN PATCHOGUE.

NO _____ MY SON WILL NOT BE ABLE TO ATTEND THE 10 COMMANDMENT HIKE.

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 OUTING:

CHECK ONE

1. I WILL BE ABLE TO PROVIDE TRANSPORTATION FOR _____ SCOUTS.
2. I WILL NOT BE AVAILABLE FOR THIS OUTING.

I GIVE PERMISSION FOR _____ TO DRIVE MY SON TO/FROM THE HIKE.

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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