

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

The Troop will be attending the Benjamin Tallmadge District Winter Camporee from January 9 through January 11 at Baiting Hollow Scout Camp. Full Class A uniform must be worn all day Saturday during the camporee. Patrols will be visiting seven different stations on Saturday. In the afternoon, a sled race will be held (with or without snow). In the evening a Dutch oven dinner contest will take place. This is a good opportunity for Scouts to also work on advancements.

We plan on leaving from 1-800-FLOWERS in Selden on Friday evening at 6:00 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 \$35 for each scout (including breakfast, lunch, dinner and breakfast and camporee patch). Adults are free.

Please complete the form below and return to the Troop by Thursday, December 18<sup>th</sup>. We need to finalize all the plans by January 1<sup>st</sup> so we can determine meals and other organizational items. Please make sure you submit the form by then. Thank you.

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YES \_\_\_\_\_ I HEREBY GIVE \_\_\_\_\_ PERMISSION TO ATTEND THE WINTER CAMPOREE ON JANUARY 9 - 11 AT BAITING HOLLOW SCOUT CAMP.

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

**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/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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