BSA TROOP 197 ATLANTA, GEORGIA

SCOUT OUTING PERMISSION SLIP 2019-19

| | | In case of Emergency, Please contact: | | |
|---------------|------|---------------------------------------|--------|------|
| Scout's Name: | | Name: | | |
| Scout's Rank: | | Relationship: | | |
| Birthdate: | | Address: | | |
| Home Address: | | City: | State: | Zip: |
| City: State: | Zip: | Work Phone: | | |
| | | Home Phone: | | |
| | | Mobile Phone: | | |

I give permission for my child, ______, to participate in the "Outings" of BSA Troop 197 of Atlanta, GA described below and any activities associated with or related to the Outings. My child has no physical problems, limitations or allergic reactions (except those listed below), of which the adult leaders ("Adult Leaders") should be aware in terms of my child's participation in the Troop's Outings.

Listed below are any physical limitations, medical needs (please refer to attachment for Atlanta Area Council Medication Dispensing Policy), and/or allergic reactions:

I have been previously informed about the Outings, and I hereby assume all risks and hazards of and incidental to the Outings, including, but not limited to any transportation to and from the Outings, other than proven negligence or proven willful misconduct. I hereby release and agree to indemnify and hold harmless BSA Troop 197 and any person or entity associated with the Outings, from and against any and all claims, liabilities, suits, proceedings, actions, causes of action, damages, costs and expenses arising out of or related in any way to my child's participating in the Outings, other than those arising out of proven negligence or proven willful misconduct.

In the event I cannot be reached in an emergency, I hereby give my permission to the physician selected by any of the Adult Leaders to hospitalize, provide medical aid, secure proper anesthesia or to order injection or surgery as may be reasonably necessary for my child.

Insurance Co.:_____Policy ID No.:_____

Signature of Parent or Legal Guardian: ______Date: _____Date: ______Date: _____Date: ______Date: ______Date: ______Date: ______Date: ______Date: _____Date: _____Date: _____Date: _____Date: ______Date: _____Date: ______Date: _____Date: ______Date: _____Date: ______Date: _______Date: ______Date: _____Date: ______Date: _____Date: _

| - | |
|-------------------|--|
| Date [.] | |

| Campout Event | Dates | Venue | General Activity |
|------------------------|------------------|-----------------------|----------------------|
| Ocoee River Rafting | Sept 14-16, 2018 | Chattooga River | Whitewater rafting |
| ISLT | Oct 19-21, 2018 | High Falls State Park | Leadership training |
| Backpacking | Nov 9-11, 2018 | Georgia AT (TBD) | Backpacking |
| Ossabaw Island (maybe) | Dec 22-24, 2018 | Ossabaw Island, GA | Service, backpacking |
| Caving/Hiking | Jan 18-21, 2019 | Cloudland Canyon | Caving/Hiking |
| Advanced Backpacking | Feb 15-18, 2019 | GA AT | Advanced backpacking |
| Rock Climbing | Mar 22-24, 2019 | DeSoto State Park | Rock Climbing |
| Hike & Backpacking | Apr 12-14, 2019 | Vogel State Park | Hiking & backpacking |
| Camp Kiwanis | May 3-5, 2019 | Danielsville, GA | Service project |