



Boy Scout Troop 23
Brooklyn, NY



Permission Slip for Troop Outing

As the parent or legal guardian of _____
Scout Name

I hereby give my permission for him to participate in an outing with Boy Scout Troop 23 Brooklyn, NY.

Date of Outing: _____

Location: _____

I give permission to the leaders of the above unit to render first aid, should the need arise. In the event of an emergency, I also give permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment, as needed. I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing except for clear acts of negligence or non-adherence to Boy Scouts of America (BSA) policies and guidelines.

In case of an emergency, I can be reached by phone at _____ or _____

If I cannot be reached, please contact:
_____ at _____

Signed (Parent or Guardian)

Date

Please Note: My son has the following allergy: _____

He carries the following medication in case of an allergic episode: _____