

**BSA Troop 114**  
**Permission and Liability Release Form**

(Turn in no later than January 26, 2017)

Activity: BSA Youth Leadership Training Campout  
When: March 10-12, 2017  
Where: F.E. Warren AFB, Cheyenne, Wyoming

Participant's Name: \_\_\_\_\_

Campout Fee:

- Scouts – \$15
- Adults (not driving) – \$15
- Adults (driving) – \$5

Payment Method:

- Scout Account
- Cash
- Check # \_\_\_\_\_

Payment due by January 26, 2017

This campout is intended to be a leadership learning experience for the scouts and leaders that attend. Scouts must be at least First Class to attend this campout. All patrol leaders, senior patrol members and other scouts with leadership positions or interest in leadership positions in the troop should attend.

The participants will be driving to Cheyenne, Wyoming the evening of March 10, 2017 at a time when there is heavy traffic along I-25. They will be camping indoors at the Air Force Base but scouts should be prepared for winter weather conditions in any case. We expect to return to the Scout Hut around 11:00 am on March 12, 2017.

There are no known hazards expected on this campout, but you should be aware that F.E. Warren Air Force Base is an active military facility and live weapons are on the grounds. Precautions to provide a safe and enjoyable experience will be taken, but there can be no guarantee of absolute safety against injury or accident. In recognition of the inherent risks of attending the Leadership Campout, I assume full responsibility for personal injury, accidents and illness, including death, which may occur from my participation. I acknowledge that I understand the risks associated with participating in the Leadership Campout (whether outlined herein or not) and do hereby release, forever discharge and agree to hold harmless the Boy Scouts of America, Troop 114 and any of its adult leaders from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by me or my child while participating in the Leadership Campout.

Leadership Outing Participant

I have read the above and understand the risks associated with this campout and agree to come fully prepared for Fall/Winter camping conditions.

Participant's Signature: \_\_\_\_\_

**(Parent / Guardian permission & acknowledgement)**

We are the parents or legal guardian(s) of this participant, and hereby grant our permission for him to participate fully in the Leadership Campout and hereby give our permission to take him to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. Further, should it become necessary for our son to return home due to medical reasons, disciplinary action or otherwise, we hereby assume all transportation costs.

Parent / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Medications to be taken on trip: \_\_\_\_\_

(All medications should be given in their original containers to the trip leader prior to departure)