

BSA Troop 114
Permission and Liability Release Form

(Turn in no later than November 12)

Activity: Pack 461 Campout
When: November 21-23, 2015
Where: Camp Tahosa, Ward, CO

Participant's Name: _____

Campout Fee:

- Scouts – TBD
- Adults – TBD

Payment Method:

- Cash
 Check # _____

Payment due by November 12, 2015

The Pack 461 Campout will be held at Camp Tahosa – near Ward, CO. We will be leaving Friday, November 21, and driving to Camp Tahosa where we will sleep in tents. We will return on Sunday morning, November 23. The scouts will be participating in various physical activities and games on Saturday that may involve strenuous activity. Winter camping conditions will be likely so make sure that you have appropriate clothes and sleeping gear. **Be prepared!**

Due to the uncertainty of the weather, we cannot predict what the conditions will be. It could very well be low temperatures, windy, rainy or even snowy conditions. 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 Pack 461 Campout I (and for or on behalf of my child participant) assume full responsibility for personal injury, accidents and illness, including death, that may occur from my child's (or my) participation.

I acknowledge that I understand the risks associated with participating in the Pack 461 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 Pack 461 Campout.

Pack 461 Campout Participant

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

Participant's Signature: _____

(Parent / Guardian permission & acknowledgement)

I am the parent or legal guardian of this participant, and hereby grant our permission for him to participate fully in the Hunger Games 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: _____

Prescription medications to be taken on trip: _____
(All medications should be given in their original containers to the trip leader prior to departure)