

BSA Troop 114
Permission and Liability Release Form

Activity: Camp Cris Dobbins Summer Camp
When: June 19 – June 25, 2016
Where: Camp Cris Dobbins, Elbert, CO

Participant's Name: _____

Summer camp will be at Camp Cris Dobbins in Elbert, CO. We will depart on Sunday (6/19) morning and returning the following Saturday (6/25). Travel will be by personal vehicles. Scouts will be participating in Summer Camp activities at Camp Cris Dobbins. This trip may involve strenuous activity, depending on the specific programs each Scout elects to participate in. All camp program activities, including aquatics, rope climbing, and shooting sports, will be under the supervision of trained camp staff. Make sure you have the appropriate gear as described on the packing list. Spring/Summer 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. 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 Camp Cris Dobbins, 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 at Camp Cris Dobbins (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 it's 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 Rafting Campout.

Camp Cris Dobbins Summer Camp Participant

I have read the above and understand the risks associated with this campout and agree to come fully prepared for spring/summer 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 Camp Dobbins Summer Camp 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)