

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

(Turn in no later than October 6, 2016)

Activity: Mountain Biking Campout  
When: October 14-16, 2016  
Where: Bear Creek Lake Park, Lakewood, CO

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

Campout Fee:

- Scouts – \$15
- Adults – \$15

Payment Method:

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

Payment due by October 6, 2016

We will be driving to Bear Creek Lake Park in Lakewood, Colorado on Friday night and camping in tents. Travel will be in personal cars. Bring a sack dinner for Friday night. The scouts will be participating in various mountain biking activities on Saturday. Scouts will need to bring their own bicycles and helmets. This trip will involve strenuous activities. Fall/Winter camping conditions will be likely so make sure that you have appropriate clothes and sleeping gear. **Be prepared!**

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 Mountain Biking 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 Mountain Biking 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 Mountain Biking Campout.

Mountain Biking Campout Participant

I have read the above and understand the risks associated with this campout and agree to come fully prepared.

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

**(Parent's permission & acknowledgement)**

We are the parent(s) or legal guardian(s) of this participant, and hereby grant our permission for him to participate fully in the Mountain Biking 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 to the trip leader prior to departure)