

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

(Turn in no later than May 4, 2017)

Activity: Rafting Campout  
When: May 19-22, 2017  
Where: Buena Vista, Colorado

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

Emergency Contact  
Number(s) while on Campout: \_\_\_\_\_

- Campout Fee:
- Scouts – \$85
  - Adults (not driving) - \$85
  - Adults (driving) – \$75
  - **\$8 late fee after April 14**

- Payment Method:
- Scout Account
  - Cash
  - Check # \_\_\_\_\_

Payment due by May 4, 2017

The Rafting Campout will be held near Buena Vista, Colorado. We will depart on Friday evening and camp in tents in the Arkansas Headwaters Recreation Area, Ruby Mountain Campground. The scouts will be rafting the Arkansas River (Browns Canyon) with the Acquired Tastes Rafting Company ([www.atraft.com](http://www.atraft.com)) on Saturday. Scouts and adults should be strong swimmers and must have passed the BSA swim test (i.e. blue swimmers) in order to participate in the rafting portion of the campout. This trip will involve strenuous activity. Spring/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. 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 Rafting 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 Rafting 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 Rafting Campout.

Rafting 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: \_\_\_\_\_ Date: \_\_\_\_\_

**(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 Rafting 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)