

BOY SCOUTS OF AMERICA - TROOP 755
DETROIT AREA COUNCIL - NORTHVILLE, MICHIGAN

PARENT AUTHORIZATION AND OUTING CONSENT FORM

My son, _____, has my permission to attend Troop 755's _____ at _____, and to engage in all troop activities, except as noted below.

In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational and recreational organization, membership in which is voluntary, and having full confidence that every reasonable precaution will be taken to ensure the safety and well-being of my son, _____ I hereby agree to his participation and waive all claims against the leaders of this activity and officers, agents and representatives of the Boy Scouts of America.

In the event I cannot be reached in an emergency situation, I hereby give permission and authorization to the attending leaders to obtain proper medical treatment for my son to include hospitalization, proper anesthesia or to order injection or surgery for my son as appropriate.

Signature: _____ Date: _____

Parent will attend: []
Parent will drive: _____ Leave: from _____
• To Campout [] At: _____,
• From Campout [] Return: by _____,

Total number of seat belts: _____
Driver's name: _____
Driver's license number: _____
Year, Make, Model: _____

Vehicle insurance:	\$ _____ K min	\$ _____ K min	\$ _____ K min
	Liability	Liability	Property
	Each	Each	Damage
	Person	Occurrence	

NOTE:

Comments/exceptions:

****DRIVERS ARE NEEDED****

Parents: Please detach and retain for your information.

Destination

<u>Departure</u>	• Date	<u>Return</u>	• Date
	• Time		• Time
	• Location		• Location

Emergency Phone _____.