

Troop 708 Permission Slip

Activity: 100th Anniversary Jamboree

Date: April 16, 2009 – April 18, 2009

Departure Location: tbd

Departure time: tbd

Cost: \$45 including food, patch, entrance...

Return Location: tbd

Return: tbd

I, _____, give permission for my son, _____, to attend the outing to 100th Anniversary Jamboree at the Alameda County Fairgrounds, Pleasanton, CA on April 16 – 18, 2010.

I hereby authorize (the Director of the Scouting Activity) as agent of the undersigned to consent to any X-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment and hospital care for the above minor which is deemed advisable by and to be rendered under the general and special supervision or any physician or surgeon, licensed under the provision of the Medical Practice Act or any dentist licensed under the Dental Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or dentist, at a hospital, Scout Camp or elsewhere.

Parents Name

Date

Parents Signature

Emergency Phone Number