

Activity: Black Diamond Mines

Date: September 22 - 23, 2007

Departure Location: First Presbyterian Church parking lot

Departure time: Meet at 9:00am, Saturday September 22, 2007

Cost: \$20.00

Return Location: First Presbyterian Church parking lot

Return: Between 1:00pm to 2:00pm, Sunday September 22, 2007

I, _____, give permission for my son,
_____, to attend the outing to **Black Diamond Mines** on **September 22 - 23, 2007**. 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