

## TROOP 171 PERMISSION SLIP TEMPLATE

Outing: OUTING NAME and OUTING DATE

Cost for first Scout in a family: \$XX Cost for each additional Scout in a family: \$YY

**COVID PRECAUTIONS:** Parents of Scouts; consideration for your family safety is your decision Troop 171 cannot make that judgement for you. There is no obligation to attend any of our outings or meetings. Troop 171 leaders will take every precaution and will follow the Covid-19 Protection Procedures approved Troop Committee. (A copy is available on the Troop website.)

During the NC phase periods, Troop 171 will be properly staffed with adult leaders in place to make sure we are following these guidelines.

The Center for Disease Control (CDC) lists the following Covid-19 symptoms such as: fever, cough, shortness of breath or difficulty breathing, body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. We do ask that you be attentive to your Scout's health and let us know if they have any of these symptoms so that they can be evaluated by a qualified adult to determine if they can safely participate in the Troop event.

Does your Scout have any of the coronavirus symptoms? If yes list below.	YES:	NO:
Has anyone in your family had known contact with Covid-19?	YES:	NO:

**WAIVER AND AUTHORIZATION:** I authorize participation of this youth in this activity and waive all claims against the leaders of this trip, officers, agents, and representatives of the Boy Scouts of America, any sponsor, or members and employees of the sponsor(s). The Registered Adult Scout Leader(s) at the activity has/have my permission to obtain and authorize medical treatment for this Scout at my expense should such treatment be deemed by them to be necessary.

**Note that a BSA medical form and insurance card are required to participate in this activity.**

**RESPONSIBILITY:** I also understand that if the behavior of my Scout disrupts the outing and cannot be managed by the leaders on the outing, I will be asked to come and get them immediately. *If asked to get my Scout, I or a representative will do so immediately.* Any representative must have a photo ID and written permission to pick up the Scout before a Scout can be released to an adult. I understand that the decision to send a Scout home is completely at the discretion of the Registered Adult Leaders on the outing.

Scout Name(s) \_\_\_\_\_

Signed \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or legal guardian)

Emerg. Phone #: (cell / other) \_\_\_\_\_ (cell / other) \_\_\_\_\_

Special Instructions \_\_\_\_\_