

**Troop 138 BSA**

**Naugatuck, CT.**

**Permission slip for troop activities**

Scout \_\_\_\_\_ has my permission to participate

In the \_\_\_\_\_ activity that will occur on

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_. In the event of a medical emergency he may be treated for such

an emergency under the supervision of the Scoutmaster or designated event adult

leader : \_\_\_\_\_ without first consulting with the undersigned parent or guardian.

\_\_\_\_\_ only after consulting the undersigned parent or guardian.

Signed: \_\_\_\_\_ parent / guardian

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

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Cut on the dashed line:

**Scouts:** Be sure to fill in your name, the correct date and event description.

**Parents:** Be sure to select the correct medical treatment option and sign and date the form. When arriving at the gathering place, please hand this permission slip personally to the Scoutmaster and sign your son in as having arrived.