

Boy Scouts of America Pack 4 WEBELOS, Cape Coral, Florida

Informed Consent to Participate

PLEASE FILL OUT COMPLETELY AND RETURN WITH YOUR SON'S CLASS 1 MEDICAL FORM AND FULL PAYMENT:

1. My child _____ and I (Parent Name: _____) will be participating in the Pack 4 WEBELOS Boot Camp at Camp Miles – sponsored by Troop and Crew 4.

DATE: Saturday November 17th to Sunday November 18th, 2007

ACTIVITY / COST: \$22.00 (Payment due date: Tuesday October 30th, 2007 – Matt Hannam)

DEPART FUMC: 7:15 am on Saturday November 17th, 2007 (Be at the church by 7:00 am.)

ARRIVE AT FUMC: Around 1:30 pm on Sunday November 18th, 2007

2. Parents are required to drive their own son to and from the camp, unless prior arrangements have been made in writing and the information has been given to Matt Hannam the organizer of the weekend.
3. My child will not be permitted to depart for this activity unless a signed Consent-To-Treat Form (medical data sheet) and the signed Informed Consent Form are on file with the WEBELOS Den Leaders.
4. In the event of a medical emergency involving my child during this activity, and being unable to contact me or my designated physician, the adult leader may obtain medical treatment for my child at my expense. I understand that in order to participate in this event my son must have a valid Class 1 Personal Health and Medical Form. I understand that this form must be passed in to the event organizer by no later than Monday October 30th, 2007.
5. Behavior: If during this activity the adult leaders deem it necessary that my child be removed from this activity, I agree to provide return transportation for my child as soon as possible. I understand that my son must live by the Scout Oath and Law at all times and that his behavior must not disrupt/hinder the learning opportunities of others. The WEBELOS are preparing for a competition and my son understands the importance of appropriate behavior. My son has been informed of this policy and has signed below to show that he will live by the Scout Oath and Law at all times.

WEBELOS Scout Signature: _____

Date: _____

Therefore, I agree that my child _____ may participate in this activity and, having full confidence that all reasonable safety precautions will be taken, I agree to abide by any decisions that adult leaders of this activity deem necessary to provide for the safety, well being, and good conduct of all participants. Also, in consideration of the benefits to be derived from this activity, and in view of the adventurous nature and voluntary membership of the Boy Scouts of America, I waive any and all claims against the leaders of this activity, and officers, agents, sponsors, and the representatives of the Boy Scouts of America, that may arise from my child's participation in this activity.

I have read and understand the above statement - (Please place an X.) Yes _____

Signature of Parent or Guardian

Date