

Boy Scout Troop 8 Independence, Ky

Permission slip for troop event.

My son/sons (name) _____

Have/Has my permission to attend the scout event on the following dates

_____ to _____ 2007

Signed _____ date _____ 2007

Emergency contact phone numbers: **Someone must be available at all times in case of an emergency.**

	Name	Relationship	Phone number
1.	_____	_____	(____) _____
2.	_____	_____	(____) _____

Medication: Any scouts, who must take prescription drugs during a scouting event, must turn them into the leader in charge. **They must be in a Ziploc bag with simple direct instructions for use.** A leader will dispense them per directions.

Please follow the above directions. My son will be taking the following medication

They must be in a Ziploc bag with simple direct instructions for use.

Boys Scout and Venture Crew members of Troop 8 can use this form.