



**SCOUT PERMISSION SLIP**

Outing: PACK OUTING/FUNDRAISING DAY  
Destination: HALL OF FAME LANES 5155 WEST TUSCARAWAS ST PERRY TWP.  
Date: SATURDAY MAY 3, 2009  
Cost: \$8.25 PER PERSON. IF YOU RAISE \$100.00 YOUR \$8.25 WILL BE REFUNDED TO YOU.  
Times: MEET AT THE BOWLING ALLEY AT 12:30PM. BOWL FROM 1:00-3:00PM.  
Dress: CLASS "B" UNIFORMS  
Comments: COME OUT AND HELP SUPPORT THE PACK.

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**For Child Attending**

Child's Name: \_\_\_\_\_

In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America (BSA) is an educational organization, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety and well-being of my child during this activity, I hereby agree to his participation and waive all claim against the leaders and helpers of this activity, Pack 916 of Massillon, OH, Troop 916 of Massillon, OH, St. Paul's Lutheran Church of Massillon, OH and the officers, agents and representatives of the BSA.

I am aware that every effort will be made to contact parents or legal guardians through home and emergency numbers in the case of accident or illness; however, if it is necessary for a physician or other emergency personnel to attend my child before I can be reached, he may have emergency medical attention at my expense. I hereby authorize the attending parent leader(s) to obtain and/or secure proper medical treatment for my child.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Legal Guardian)

Phone numbers where parent or legal guardian can be reached during the outing: \_\_\_\_\_ or \_\_\_\_\_

**Regarding Medications:** *If a child is attending without a parent or legal guardian and is on medication, please clearly label the medication and give it to Mrs. Hookey.*

Notes: \_\_\_\_\_  
\_\_\_\_\_

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**For Adult Attending**

Adult's Name: \_\_\_\_\_

Having full confidence that every precaution will be taken to ensure my safety and well-being during this activity, I hereby agree to participate and waive all claim against the leaders and helpers of this activity, Pack 916 of Massillon, OH, Troop 916 of Massillon, OH, St. Paul's Lutheran Church of Massillon, OH and the officers, agents and representatives of the BSA.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Adult Attending)

***DETACH HERE AND KEEP FOR REFERENCE***

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<b>Pack 916 Primary Contacts for This Event:</b>		<b>Home</b>
Natasha Broome	Fundraising Coordinator	330-268-2752