INFORMED CONSENT AGREEMENT

I understand that participation in the _____ offered through the
(Activity)

_____ Council, Boy Scouts of America, involves a certain degree of risk. I have

carefully considered the risk involved and have given _____, my (son/daughter),
(Name)

my consent to participate in _____ on _____
(Activity) (Dates)

This form must have both parent/guardian signature(s):

_____	_____
Name (Please print.)	Name (Please print.)
_____	_____
Signature	Signature
_____	_____
Date	Date

Telephone number(s) (area code included) _____