



**Boy Scouts of America
Troop 407
Novi, Michigan**



Camping Permission Slip

Campout/Trip Name: 2008 Summer Camp – Curtis Campsite, Camp Rotary

Trip Itinerary: 7 days, 6 nights at Lake Huron Area Council's Scout Camp in Clare County, Michigan
Working on advancement and/or merit badges

Travel Clothing: Full Field (Class 'A') Uniform Activity (Class 'B') Uniform
Boots, jackets, coats, gloves, scarves, etc. as appropriate for the weather

Leaving: Date Sunday, June 29th Time 10:00 AM Place Novi Civic Center

Returning: Date Saturday, July 5th Time 2:00 PM Place Home

Cost: \$250.00 (\$220.00 for new scouts or if pay half, \$110.00, by March 4) **which excludes** lunch money on trip to and from camp, craft money and any other spending money at the camp trading post.

MONIES MUST BE PAID BY May 6, 2008

Personal Equipment List:

<input type="checkbox"/> Sleeping Bag	<input type="checkbox"/> 6 Complete sets of clothes	<input type="checkbox"/> Flashlight	<input type="checkbox"/> Totin' Chip
<input type="checkbox"/> Insulated Pad (for under sleeping bag)	<input type="checkbox"/> Stocking Hat	<input type="checkbox"/> Scout Knife	<input type="checkbox"/> Fire'n Chip
<input type="checkbox"/> Duffel Bag or Backpack	<input type="checkbox"/> Ditty Bag (for dirty clothes)	<input type="checkbox"/> Compass	<input type="checkbox"/> Scout Manual
	<input type="checkbox"/> Rain Poncho	<input type="checkbox"/> Pen/Pencil	<input type="checkbox"/> Paper

Keep this part for your reference

Return this part to the Troop

- My son has my permission to accompany Troop 407 on their Campout/Trip.
- I am familiar with the mode of transportation and leadership accompanying the TROOP.
- I understand that reasonable measures will be taken to safeguard the health and safety of my son, and that I will be notified as soon as possible in case of an emergency. In the event of sickness or accident, I authorize the calling in of a doctor and/or the providing of other necessary medical services at my expense.
- I Agree that the leader and/or any adult assisting in supervision and/or transportation of my son in connection with this trip shall not be liable in any way for any injury or illness incurred by my son as a result of his participation in the activities of the TROOP, provided that my son shall receive the same supervision and care while participating in such activities as the other members of the TROOP whose parents are present to provide such supervision and care.

Scout's Name: _____

Signature (parent or guardian): _____ **Date:** _____

Phone #: _____ **Emergency Phone #:** _____

Insurance Company: _____ **Policy #:** _____

Other pertinent information regarding my son:

I can drive: **Number of seats with seatbelts:** **Driver's License #:** _____