DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My son, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a registered Boy Scout with Troop 40, Three Fires Council, Boy Scouts of America, has my permission to attend the following activity: *Fill in Event Name and Location, Drop off Date/Time, Location, Pickup Date/Time, Location.*

I understand that there is some risk in any Boy Scout activity and have discussed with my Son the importance of safety with this activity, and that good behavior is essential for the safety of my Son, and for the safety of the other Boy Scouts, Adult Leaders, and any other participants or observers that may be present. I have discussed with my Son that bad and/or dangerous behavior that puts my Son or anybody else in danger will result in having to be called and my Son picked up from this activity and not is allowed to continue with this activity.

I understand that all the Adult Leaders are registered with the Boy Scouts of America and that every effort will be taken to insure the safety of my Son. In the event of an accident, whether in a vehicle traveling to or from a Scouting activity, (I understand that all Boy Scouts will be in a seat belt with the belt fastened) or in a Boy Scout activity or event that my Son is attending, I will not hold the Adult Leaders responsible for this accident, nor will I hold Boy Scout Troop 40 responsible for this accident. I will not hold any adult acting as a driver to or from a Scouting activity that is not a registered Leader with the Boy Scouts of America that has my Son riding in their vehicle responsible for any accident.

I understand that the Adult Leaders will take every precaution possible for the safety of my Son, and that the Adult Leaders realize the importance of safety and will discussed any and all safety precautions with my Son, as well as the rest of the Boy Scouts attending this activity. I understand that there will always be two registered Adult Leaders on overnight activities. I understand that I will be able to attend this event, and will register with the Boy Scouts of America if this event is an overnight activity.

**Signed by Parent or Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COST: $XX for FRI, SAT, SUN.**