

**2010 January Ski Trip Permission Form
Troop 55 Boy Scouts of America
Grove Methodist Church**

In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational institution, membership in which is voluntary, and having full confidence that every precaution will be taken by the unit leader, **Paul Benyo**, to ensure the safety and well being of my Scout son(s) /ward(s), namely,

Scout's Name(s) _____

on the activity identified below, I agree to his (their) participation and waive all claims against the leaders of this trip, the officers, agents, and representatives of the Boy Scouts of America, and the troop's sponsor.

Emergency Information

In the event of an emergency during the activity, the troop leader has my permission to obtain medical treatment, at my expense, from the nearest hospital or doctor, if the scout's own doctor is not readily available.

During the activity listed below, I can be contacted at the following phone numbers and will accept collect long distance phone calls.

Home () (-)

Mobile () (-)

Insurance Carrier: _____ Group/Acct. No. _____

Use the back of this form to explain any special medical conditions that the unit leader should be aware of.

Parent/guardian Signature: _____

Because troop activities indirectly benefit parents/guardians, and being over 21 years of age, parents/guardians are requested to share the responsibility and cost of driving scouts to and/or from the activity. The vehicle used to transport the scouts should be equipped with a seat belt for each scout.

If you can drive, write "yes" for : TO: _____ FROM: _____ BOTH _____

Driver: _____ # of Scouts I can transport: _____

Skiing at: **Greek Peak Ski Resort, New York**

Depart From : **Grove Church** Time : **6:00 pm** Date: **Friday, January 22, 2010**

Return To : **Grove Church** Time : **1:00 pm** Date: **Sunday, January 24, 2010**

	# Participating		Cost per person		Total
Lift tickets, food, lodging		x	\$75.00	=	
		x	\$	=	
Total					