



Parental Informed Consent Agreement 2008 (Scoutmaster Copy)

Troop 919 Parental Informed Consent Agreement 2008

I understand that participation in activities and events (many of which involve vehicle travel) offered through Troop 919 of the Old Hickory Council, Boy Scouts of America, during 2008, involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my son, I have given (son's name) _____ my consent to participate in Troop activities as outlined in the Troop calendar (unless specifically excluded in the notes section below). In case of emergency, I understand every effort will be made to contact me. In the event I can not be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery or injections of medication for my child.

Scout's Printed Name & Signature _____

Parent/Guardian Name & Signature _____

Parent/Guardian Name & Signature _____

Parent/Guardian Home Phone _____ Work Phone: _____ Cell: _____

Parent/Guardian Home Phone _____ Work Phone: _____ Cell: _____

Other person to contact if unable to reach parent/guardian in event of emergency:

Name: _____ Phone _____ Work _____ Cell: _____

Any other instructions or contact information in the event of an emergency: _____

Date this form was signed: _____

Notes: _____
