

Troop 64 - Boy Scouts of America

First Baptist Church, Haddonfield, NJ

Parents: Troop 64 is planning Camping/biking at Parvin State Park. Please review this form carefully. **This permission slip, signed, and \$20, is required on Monday, 6/23. We will be camping with the Pack.**

Start: June 28, 2008 – Meet at Parvin State Park in the morning
End: June 29, 2008 – Will return to Church Parking lot around 12:00pm

Activity: Biking/Camping at Parvin State Park

Location: Parvin State Park
701 Almond Road
Pittsgrove, NJ 08318
Phone (856) 358-8616

Website: <http://www.state.nj.us/dep/parksandforests/parks/parvin.html>

Leaders Mr. Jim Choyinski
in Charge:

Additional Information

- Wear Scout Uniform
- Dress for weather
- Sleeping bag
- Changes of clothes
- Wash cloth
- Toothbrush
- Hiking Boots
- Extra socks
- Rain Poncho
- Water bottle
- Compass
- Bike
- Fishing equipment

Cost: \$20.00 per scout

This amount and a signed permission form are due 6/23. For those campers leaving immediately after Jim C's Eagle Court of Honor, you will need to provide you own meals for Friday evening and Saturday morning. The above costs covers Saturday lunch, Saturday dinner, and Sunday breakfast.

Boy Scout _____ has my permission to attend the Boy Scout Troop 64 trip:

Camping/biking
Activity

Parvin State Park
Camp Name/Location

June 28-29, 2008
Date(s)

I understand the leaders; the sponsoring institution, and the Boy Scouts of America will not be held responsible for acts of negligence committed by my son. In the event that I cannot be reached in a medical emergency, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery and injections of medications for my son.

Health Insurance: _____ I.D.# _____ Tele: _____

Parent/Guardian Telephone for above dates: _____

Parent/Guardian will: Stay with Troop Drive both ways Drive one way – To / Return

Driver: _____ D.L. # _____ State: _____

(All passengers must wear seat belts.)

Insurance coverage _____ / _____ / _____ Vehicle: _____ / _____ / _____
(Liability limits: Individual/Accident/Property) (Make Model Year)

Parent/Guardian Signature: _____ Date: _____