

Ten Commandments Hike Permission Slip

This Completed form must be submitted prior to participating on Pathfinder District

Date: Saturday, May 1, 2010

Place: St. Matthew Catholic Church, 1001 E Schaumburg Rd, Schaumburg IL

Time: 8:00 AM Check In Begins

Returning: Place: St. Matthew Catholic Church Finish Time: Approximately 3:00 PM

Total Cost per Scouts and Adults – \$9.00 (Includes Drink, Lanyard, Maps and Event Patch)

Total Cost per Trained Leaders – \$9.00

Bring: Your own Lunch, waterbottle, daypack with general outdoor dayhiking gear, walking shoes, rain gear, sunscreen, garp, snacks and personal items.

<Hike will commence Rain or Shine!>

Event: Ten Commandments Hike, Schaumburg, IL,
Saturday, May 1, 2010

NWSC Pathfinder Event Account Number: 1-772-6801-20

Scout Name: _____

Amt collected: \$ _____

Boy Scouts of America – Girl Scouts (Circle One) Troop Crew or Pack # _____

My youth, listed above, has my permission to take the hike described above, with the BSA Pathfinder District. I am familiar with the details of the event and have provided my youth with the necessary funds and equipment. I will be sure that he or she does not attend if they are not in good physical condition on that day. In consideration of service donated by others, I will hold free from liability, in case of accident or illness, the Northwest Suburban Council - Boy Scouts of America, and the leaders of the participating Boy Scout Troops and Cub Scout Dens. I also give my permission to have my youth taken to a hospital and/or treated by a physician in case of accident. If the need should arise, I can be reached at the following number(s):

Phone #s (Hm/Wk/Cell) _____

Specify medical allergies, chronic illnesses or other conditions:

Signed: _____ (Parent or guardian)

Date: _____

Parents, Please check: _____ Yes, I will go on this outing.

Amt collected: \$ _____

Scout Agreement:

As a Scout of Unit: _____ and with my parent's support, I agree to abide by the Scout Law on this event. If I violate this Agreement, my parents will be notified of the violation. Disciplinary action will be taken based on the judgement of the adults(s) in charge.

I understand violation of this Agreement may affect my participation in the next BSA activity.

Scout's Signature _____