

Parent/Caregiver Permission Form

Please print all information. Thank you.

Troop #: _____ is planning a trip on (date): _____

To: _____ Tel. of Location: _____

ARRANGEMENTS FOR TRANSPORTATION:

Date: _____ Time: _____ Place: _____

Date: _____ Time: _____ Place: _____

Mode of transportation: _____

LEADERS ACCOMPANYING GIRLS:

Name: _____ Tel: _____

Name: _____ Tel: _____

EACH GIRL WILL NEED:

Expenses: _____

Other equipment and clothing: _____

IN CASE OF EMERGENCY, THE LEADER WILL NOTIFY THE TROOP PARENT CONTACT WHO WILL IMMEDIATELY NOTIFY PARENTS.

Name of Troop Parent Contact: _____ Tel: _____

Leader's Signature: _____ Date: _____

PLEASE PRINT ALL INFORMATION. SIGN, TEAR OFF, AND RETURN TO TROOP LEADER BY (DATE): _____

My daughter (print name) _____ has permission to participate in
She is in good physical condition and has not had any serious illness or operation since her last health exam. She may participate in
all planned activities.

I will pick up my daughter on return.

My daughter may travel home alone at end of trip.

IN CASE OF EMERGENCY, I CAN BE REACHED AT:

Address: _____ Tel Day: _____ Tel Eve: _____

IF I CANNOT BE REACHED, THE FOLLOWING PERSON IS AUTHORIZED TO ACT ON MY BEHALF:

Name: _____ Tel: _____

Address: _____ Relationship to Participant: _____

IN THE EVENT THE CONTACT PERSON OR I CANNOT BE REACHED, THE TROOP LEADER IS AUTHORIZED TO ACT ON MY BEHALF.

Physician's Name: _____ Tel: _____

PARENT(S)/GUARDIAN(S) SIGNATURE: _____