BOY SCOUTS OF AMERICA
TROOP 574

PARENTAL CONSENT FORM

In consideration of and recognizing the educational benefits to be derived through this activity and through involvement in the Boy Scouts of America, I consent to the participation of my son(s) in the activity described below, agree to pay the associated fees, and waive any claims I may have against the leaders of this activity.

Description of activity: NEW SCOUT CAMPOUT.
Lake Ray Roberts – home of Donna & Rob Hull

Activity dates: May 21st, 22nd, 23rd. Fees: $20.00 per person
$20.00per adult

Departure: from HCUMC Troop Leadership/Venture Crew 6:00pm Friday
Troop and New Scouts 7:00am Sat morning

Return: Sunday 11:00am – 12 noon
Be ready to get a call from your scout for an exact time on Sunday morning.

Please return this form to Mr. Thomas by May 10th. Check / Cash / Scout Acct.

Parent Name: _____

Scout name(s): _____

Telephone: _____

Signature: _____ Date: _____

Transportation for the Activity

☐ I plan to attend this event.

I **can** / **cannot** provide transportation for this event.

If providing transportation, total number of seats available for scouts : _____