

**BOY SCOUTS OF AMERICA  
TROOP 574**

**“BICYCLING CAMPOUT”**

**PARENTAL CONSENT FORM**

In consideration of and recognizing the educational benefits to be delivered 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: “Bicycling Campout”  
2 nights at Lake Ray Roberts (Isle du Bois State Park)

Opportunity to bicycle, fish and work on merit badges and other advancements

Activity dates: September 17 – 19                      Fees: \$25.00 per person

Starts: 9/17/10 @ 6:00 PM (leaving at 6:00 pm sharp from HCUMC)

Ends: 9/19/10 @ 12:00 PM (will return to HCUMC)

Please return this form to Mr. Goldis or Mr. Lutz by Aug 30<sup>th</sup>

Check # \_\_\_\_\_ / Cash / Scout Acct.              Amt. Submitted \$ \_\_\_\_\_

Parent Name: \_\_\_\_\_

Scout name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- 
- I plan to attend
  - I cannot attend
  - Total number of seats available (including driver)