



TROOP 400 PARENTAL RELEASE FORM

Whereas _____, a child of whom I have legal custody as a parent or guardian, will be a member of a group from Troop 400 of the Gulf Coast Council, Boy Scouts of America, participating in numerous activities such as, but not limited to camping, hiking, climbing, boating, canoeing, swimming, etc., all of which have some element of risk involved; and

Whereas the guidance during such outings will meet standards established by the Boy Scouts of America; it is agreed as follows:

1. In the event my child, during the trip, requires medical services including admission to a hospital, any leader of Troop 400 may seek and provide for such services as my duly authorized representative. I realize that the group must continue in accordance with a pre-determined timetable. In case my child requires hospitalization, Troop leadership has the right to provide for the admission and care of my child to a hospital and to leave him there after reasonable efforts have been made to care for his welfare and to contact me, and without further obligation on the part of the Troop leadership. Phone numbers listed below may be used to contact me and I will advise the Troop leader in writing of any changes of those numbers. I assume full financial responsibility for any portion of the medical expense not covered by any trip insurance carried for the group. I further assume full responsibility for making any and all arrangements for returning the child to his home from the hospital, thereby relieving Troop leadership of any responsibility in this matter.

2. I realize that during the trip good conduct befitting a member of the Boy Scouts will be required of my child for the maintenance of good order and safety of the group. Accordingly, I hereby authorize Troop leadership to discipline my child in a reasonable way and in accordance with the regulations and guidelines of the Boy Scouts of America. I understand that obnoxious acts such as using tobacco, speaking with profanity, consuming intoxicants or drugs, fighting, stealing, or failing to act in accordance with normally accepted rules of good conduct will not be tolerated by the leaders. In the event that my child violates the rules of good conduct and, in the opinion of the leaders, becomes incapable of being corrected by reasonable means and within a reasonable period of time, I authorize the leaders to provide for placing him on a public conveyance, preferably an airline, for immediate return to Pensacola, Florida.

3. In the event that the leaders shall make any advance disbursements or payments of money on the account of the authority given pursuant to the above items. I agree to pay on demand for all such expenditures. I further agree to hold harmless any of the Troop leaders, Woodbine United Methodist Church, the Gulf Coast Council, and the Boy Scouts of America for any damages occurring to my child or myself as the result of the leaders acting within the scope of the authority given pursuant to the above items or implicit in the fulfillment of their task as group leaders.

Emergency Phone Numbers: _____

Signed: _____

Work: _____

(print name)

Home: _____

Family Health and Accident Insurance: _____

Date: _____

Carrier: _____

Notarized: _____