

(KEEP THIS PAGE FOR YOUR REFERENCE)

TROOP 956 SPORTROCK 2009

Destination & Activity: Scouts will meet at Sportrock. Pizza will be provided by the troop. Patrols are in charge of bringing sodas and snacks for the night. The scouts will be able to climb until 11:00 PM. After 11:00, they can play video games, cards, games, or work on merit badges! Wear your Class B uniform for climbing. Bring extra clothes and sleeping gear for the evening. Breakfast (most likely donuts) will be provided by the troop.

Dates: Saturday, November 21st – Sunday, November 22nd
Arrival: 8:00 PM Pickup: 8:00 AM

Cost: \$30.00

(The cost of Sportrock is \$1,000. The troop will pay \$500 towards this event.)

Departure: Parents to provide transportation to Sportrock located at 45935 Maries Road, Sterling, VA 20166

Adult Trip Leaders:

Jim Sweeney
Jay Dahl

PERMISSION FORM, SPORTROCK WAIVER* and MONEY DUE:

Tuesday, November 17, 2009

***Sportrock requires their own liability release form to be signed by parents. The link to this release form is available on the Troop Website or you can go directly to their site at:**

http://www.sportrock.com/index.php?option=com_content&view=article&id=51&Itemid=7

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SEE FOLLOWING PAGE FOR PERMISSION FORM!

TROOP 956 ACTIVITY PERMISSION FORM

ACTIVITY: **SPORTROCK Lock In** Date: **Saturday, Nov 21st to Sunday Nov 22nd**

Day: Saturday, Nov 21st Time: 8:00 PM. Meet at SportRock

Day: Sunday, Nov 22nd Time: 8:00 AM Pick-up at SportRock

Cost: \$ 30.00

During the activity listed above, the parent(s) of Scout _____ can be contacted at the following phone #s:

Parent

Name: _____ **Home** (____) _____ **cell** (____) _____

If we are not available call:

Name: _____ **relationship** _____ **phone #** (____) _____

Special Considerations:

Is your Scout currently under a physician's care or taking any medications? **Yes** ___ **No** ___

Are there other special considerations concerning your child which we should be aware of? **Yes** ___ **No** ___

If you answered Yes to either question, please explain in **DETAIL on the back of form.**

The following medications are carried in the Troop First Aid Kit. Please signify your approval to administer these medications to your son based on need and our judgment. Any medication marked "NO" will not be administered.

Medication	YES	NO	Medication	YES	NO
Tylenol ES caplets			Benadryl Cream		
Ibuprofen (Advil) tablets			Neosporin Cream		
Benadryl tablets			Aloe Vera Gel		
Pepto-Bismol chewable					

In the event of an injury or in the case of an emergency, any adult leader of Troop 956, Boy Scouts of America, has my permission to obtain medical treatment for this scout at the nearest hospital, emergency medical facility, or physician. I also agree to reimburse the Leaders for any fees incurred by my son for any emergency, medical or other.

Parent Signature: _____ **Date:** _____

(ALSO FILL OUT & SIGN THE SPORTROCK WAIVER FORM)