



PARENT/GUARDIAN PERMISSION FOR TROOP USE

Use this form for troop activities outside of normal troop meeting time and/or place.

Parent/Guardian Permission

Troop/Group _____ is planning a (trip/activity) _____
Date _____ Time _____ Location _____
Phone number (____) _____

Arrangements for transportation:

Time and place of departure _____
Time and place of return _____
Mode of transportation _____

Adults accompanying the girls:

Name(s) 1. _____ 2. _____
3. _____ 4. _____

Each girl will need:

Expenses _____
Equipment and clothing _____

In case of emergency, the troop leader will notify:

Name _____ Phone: Cell _____ Home _____
who will immediately notify the parents.

Troop Leader's signature _____ Date _____ Phone number _____

RETURN THIS SECTION TO TROOP LEADER

My daughter _____ has permission to participate in _____
_____. She is in good physical condition and has not had any serious
illness or operation since her last health examination. During the activity, I may be reached at:

Address _____ Phone Number (____) _____

If I cannot be reached in the event of an emergency, the following person is authorized to act in my behalf:

Name and address _____

Relation to participant _____ Phone: Home _____ Cell _____

Physician's name and phone number _____

Additional remarks: _____

Parent Signature _____

Date _____