

FIESTA ISLAND CAMPOUT

MAY 19 – 21, 2017

**SAILBOATING! KAYAKING! CANOEING!
MISSION BAY, SAN DIEGO**

Troop 270's May campout will be held at the San Diego Youth Aquatic facility located on Fiesta Island at Mission Bay. This is a great facility where the scouts will have the opportunity to sailboat, kayak and canoe, all in a very safe environment. We will be staying at the campground right at the facility.

Boys and adults need to sign up and pay their \$50 fee (which includes the rental of the equipment, the campground and facility fee, food and gas fee) no later than next Monday, May 15 so we can reserve the aquatic equipment and purchase the food. Boys also need to submit the Permission Slip signed by their parent. Please no late signups and no signups unless you truly intend to go. We will be leaving the Scouthouse Friday the 19th at 5:30 and will return on Sunday the 21st at Noon or earlier.

It is very important that everyone come prepared with Class A and B uniforms, swim gear, towel, sunscreen and sandals/water shoes, which are required by the facility on their beach where we will be. Any questions, please see Warren Scott or Robin Woolsey.

**PARENT/GUARDIAN CONSENT FORM
FOR A UNIT ACTIVITY, CAMP OR OUTING**

Each youth participant must present a signed permission slip in order to attend

Troop #270
is planning the following activity

Activity Type: Fiesta Island Campout

Location: San Diego Mission Bay Youth Aquatic Center

Dates: May 19 – 21, 2017

Leader : Warren Scott

Leave From: Scouthouse

Time: 5:30 PM Friday May 19

Return To: Same

Time: 12:00 Sunday May 21

Cost per Youth/Adult: \$50.00, includes campground/facility, food and gas fees.

Items to Bring: Ten Essentials, Class A and B uniforms, sleeping bag, eating utensils, sunscreen, insect repellent, swim gear, towel, water shoes/sandals

APPROVAL

Complete, Sign, Copy or Detach and Return by May 15

My son has permission to attend the Scout trip or activity on May 19 - 21

Full Name of Participant _____ Unit Type and Number _____

Address _____ City, State, Zip _____

Birthdate (month/date/year) _____ Age During Activity _____

Has approval to participate in (Name of Trip/Activity/Outing) _____

Medications/Restrictions/Special Considerations (if any): _____

Insurance Company _____ Policy Number _____

Physician's Name _____ Phone Number _____

HOLD HARMLESS AGREEMENT

I understand that participation in the activity involved a certain degree of risk. I have carefully considered the risk involved and have given consent for my child to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity for any and all claims or liability arising out of this participation.

MEDICAL TREATMENT RELEASE

In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medications for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

Father/Guardian Signature _____ Date _____
Home/Business Phone _____ Cell Phone _____

Mother/Guardian Signature _____ Date _____
Home/Business Phone _____ Cell Phone _____

Alternate Contact _____ Relationship _____
Home/Business Phone _____ Cell Phone _____