

Troop 62 Permission/Summer Camp Instructions & Forms Checklist 2018

Scout's Name: _____

This form should accompany the documents below as a cover sheet.

Your cooperation would be appreciated.

All of these forms are available on the Troop website.

If your scout is attending summer camp, the deadline for submitting forms is July 3rd.

	Y	N
1 Troop 62 Trip Permission Slip Must have this form for all Scouts - Updated copy annually in the Spring. Signed by Parent or Guardian Dated - current	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2 BSA Annual Health & Medical Form Record (check no if not attending) Any Scout going to Summer Camp must have an updated form, dated no less than 12 months before the end date of the camp session. Web Link to the form: http://www.scouting.org/filestore/HealthSafety/pdf/680-001_ABC.pdf If you use the link you can type in most of the information. This makes the form more legible. You can also save a copy of it in a pdf file format. All information on the form must be completed if applicable. Do not write "SEE ATTACHED FORM" (except for immunizations). Part A - Consent, Release Agreement, & Authorization Name & DOB Scout Signature Parent/Guardian Signature Dated - current Part B - (2 pages) Make sure all health history is completely filled in. Name & DOB Other information, address, phone, etc. Unit Leader: <u>Leave blank</u> Council Name: <u>Connecticut Rivers</u> Unit No: <u>Troop 62</u> Insurance card copies - front and back Place both front & back copies on one 8 1/2 x 11 page Emergency contact information List any allergies/medications Immunizations - <i>you may attach record from doctor</i> * Transportation authorization - "Licensed Driver over the age of 18 with permission of the Scoutmaster." Then, parents/guardians include any adults NOT authorized in the next section.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>

Part C - To be completed by Physician.

Name & DOB

Must have signature of healthcare provider
and Date - *less than one year from camp date*

3 **BSA Camp Emergency Medical Plan** (check "N" if form is not needed)

Any Scout who brings medication to camp or any event that may need to be administered in an emergency situation, such as allergic reactions or asthma, must have this form completed. **Otherwise, do not submit this form.**

Must have Parent/guardian signature & date

Must have Physician Signature & date.

Two copies of all forms must be submitted to the Troop. We need one for the camp and one for the Troop records. If only one copy is received the forms will returned to you for an additional copy.

Please make an extra copy for yourself, just in case.

2 copies of all applicable forms are attached.

Submit only one copy of this signed checklist.

Signature _____
Parent/Guardian

____/____/____