

Parent Permission Form

Use this form for special troop activities and return it promptly to your Troop Leader in order to ensure participation in the event. **Instructions:** Troop leader fills out Section 1. Parent/guardian signs Section 2 and returns to troop leader before participation.

Section 1:

Troop/Group #: _____ is planning a _____

Date: _____ Time: _____

Phone: (_____) _____ Location: _____

Arrangements for transportation:

Time/place of departure: _____

Time/place of return: _____

Mode of transportation: _____

Leaders accompanying the girls:

Name(s): _____

Each girl will need to bring:

Expenses: _____

Equipment and clothing: _____

In case of an emergency, the leader will notify the at home contact person who will immediately notify the Parents.

At home contact's name: _____ Phone: (_____) _____

Leader's signature: _____ Phone: (_____) _____

Sensitive Issues Activity – If this box is checked we plan to take part in activities involving sensitive issues. Attendance is optional for all or part of the activities.

High Risk Activity – If this box is checked we plan to take part in activities that could be considered high risk. Attendance is optional for all or part of the activities.

(Detach and return to troop leader)

Section 2:

My daughter, _____ has permission to participate in _____
 Yes No

During the activity, I may be reached at _____ Phone: (_____) _____

Address: _____

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

Name: _____ Phone: (_____) _____

Address: _____ Relationship: _____

Physician: _____ Phone: (_____) _____

Additional remarks: _____

Sensitive Issues Activity – I understand that my child will participate in activities that could be considered sensitive. I am confident in her maturity and am comfortable with her participation.

High Risk Activity – I understand that my child will participate in activities that could be considered high risk. I am confident in her health and ability to participate.

Parent/Guardian Signature: _____ Date: _____