

Boy Scouts Of America Troop 41 Westchester-Putnam Council

PARENT OR GUARDIAN CONSENT AND APPROVAL FOR BOY SCOUT ACTIVITY (Applies to all youth participants under the age of 18)

To Whom It May Con	cern:			
Scout (print name):				
Address:				
)
has my permission to	participate in:			
to be held:		at:		
	(Date)			(Location)
any Troop outing or fu deem my son's behave	anction. If at any for inappropriate of the top provide a ph	time during or unsafe; I one number	a Troop outing will be responsible where I may	for appropriate and safe behavior at any the Adult Leaders of Troop 41 ansible for his transportation home to be reached, or designate a eneed ever arise.
Date:	Signed:	(Parent or Gu	ardian)	Relationship:
IN CASE OF EMERO	BENCY, PLEASE	E NOTIFY :		
Name:			Phone: ()
Alternate Contact:			Phone: ()
Physician: Please list any medica	l conditions or necessar	ry medications, o	Phone: ()