



Troop 612
 San Francisco Bay Area Council
 Boy Scouts of America

Parental Informed Consent and Hold-Harmless / Release Agreement.

I understand that participation in the Pinecrest Snow Campout offered through Troop 612,
(Activity)
 San Francisco Bay Area Council, BSA on Mar 20-21, 2010 , involves a certain degree of risk that
(Date)
 could result in injury or death. In consideration of the benefits to be derived and after carefully considering
 the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which
 membership is voluntary, and having full confidence that precautions will be taken to ensure the safety
 and well being of my son, I have given _____ my consent to participate
(Name of Scout)
 in Pinecrest Snow Campout , and waive all claims I may have against Boy Scouts of
(Activity)
 America, San Francisco Bay Area council, Troop 612, activity coordinators, all employees, volunteers, or
 sponsors associated with the Pinecrest Snow Campout .
(Activity)

In case of emergency, I understand every effort will be made to contact me. In the event I cannot be
 reached, I hereby give my permission to the physician selected by the adult leader in charge to secure
 proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

This form must have both parent/guardian signatures.

Parent Name: _____ Phone: _____

Signature: _____ Date: _____

Parent Name: _____ Phone: _____

Signature: _____ Date: _____

Fees are to be taken out of my Scout Account: _____
(Scout Signature)

Treasurer Approval: _____