



Permission Slip for Den Outings

Den _____, Pack 802, Mt. Diablo Silverado District, is planning an Outing.

Place: _____ Date: _____

Leaving from: _____ Time: _____

Returning to: _____ Time: _____

The cost for each boy \$ _____ This includes: _____

We have voted to pay from our den dues for each boy \$ _____

I will need to bring \$ _____, and equipment _____

Leader in charge will be: _____ Phone: _____

Emergency contact at home will be: _____

(Parent/Guardian keeps this top portion)

(Parent/Guardian fills out this lower portion and returns to Leader)

Permission Slip for Den Outings (Leaders Record)

To: _____, Den _____ Leaders

My son: _____, has permission to _____

_____ on (date) _____

I understand the cost to my son will be \$ _____.

We hereby give permission for our son _____
to receive emergency medical or surgical treatment and to be hospitalized if necessary. It is
understood that every attempt will be made to contact me, or a person below before taking this
action.

Signed by Parent or Guardian: _____

Print name: _____

Address: _____

Phone Number: _____ or, in case of emergency

Please call: _____ Phone: _____

Address: _____