BOY SCOUTS OF AMERICA – TROOP 805

ACTIVITY INFORMATION FORM

Scouting for Food – November 4 & 11, 2017 OSPL:

What:

This project is an annual National BSA service project where non-perishable foods are collected for the local food banks. We will go door-to-door with informational flyers requesting donations on Saturday November 4th, and collect and deliver the donations to a central point at the LDS church in Danville on Saturday November 11st. Scouts may choose to participate on either or both days.

This is a great event to **bring a friend** (1st class requirement 10). Scouts will also earn **service hours** for rank advancement.

Since our assigned area is large and spread out (<u>roughly 1.5 sq. miles with over 1300 houses</u>), we will need approximately 30 scouts and 10 drivers to help on both days. Parents who can drive, please fill out the information <u>especially providing your cell phone number</u>.

** Donut breakfast will be provided for participating scouts & parent drivers. **

When: Saturday, Nov 4, 2017, 9AM – 11am (Door Hanger Distribution)

Saturday, Nov 11, 2017, 9AM – 11am (Donation Collection)

Meet: Wood Ranch Club House-

Return: Scouts will be dropped off at home about one-half hour after the event.

Cost: \$0 (no charge)

Uniform: Class A, good walking shoes

Bring: Water

Questions: Michelle Marge, cell: (302) 690-9661, email: michellemarge@gmail.com

Return the permission slips to your Patrol Leader prior to the event.

Patrol Leaders submit the collected slips to the outing folder no later than the Troop meeting on Tuesday, October 31st.

BOY SCOUTS OF AMERICA – TROOP 805

INFORMED CONSENT, RELEASE AND PERMISSION TO TREAT

Scouting for Food – November 4 & 11, 2017

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emotionally dema this activity. I also and standards of c	anding. I have carefully on understand that participe conduct. I release the Boy	considered the ation in this ac scouts of Am	erisk involved a etivity is entirely derica, the local o	to attend this certain degree of risk and can not have given consent for myse voluntary and requires participal council, the activity coordinators, activity from any and all claims	If or my child to participate in nts to abide by applicable rules and all employees, volunteers,	
	n equipment to the partici			sent for a qualified range instruction in the safe handling and use		
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Select one or b	oth days:					
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	_	_		Date:		
Signature:				Cell Phone:		
			-	the person named below:		
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The following in	nformation relates to n	ny son:				
Physician's Name:				Phone:		
Insurance Company:				Policy No:		
Allergies or pe	rtinent medical infor	nation (incl.	Rx & OTC n	neds):		
			Tour Plan Infori	nation		
Drive? (Check if Yes)	Vehicle Year / Make / Model	No. of Passengers		r's License / Name / Cell Phone	Auto Insurance (Min.: \$50K/\$100K/\$50K)	
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☐ From:						
L	(Reminder: Parent	ts are requested to	provide Troop trai	nsportation on at least two outings per ye	ear.)	
v	VE NEED AT LEAST 1	TEN ADULTS	S TO PARTIC	IPATE TO MEET BSA REQU	JIREMENTS.	
	ders: Will you be parti					
	Youth Protection		-	s: YP expiration date:		