

**BSA Troop 114**  
**Permission and Liability Release Form**

(Turn in no later than December 1)

Activity: Urban Survival Outing  
When: December 9-10, 2016  
Where: Littleton and downtown Denver, CO

Campout Fee:

- Scouts – \$18
- Adults – \$22

Payment Method:

- Scout Account
- Cash
- Check # \_\_\_\_\_

Payment due by December 1, 2016

Participant's Name: \_\_\_\_\_

The Urban Survival Outing will be held in Littleton and downtown Denver. We will be “camping” in the Scout Hut on Friday night, 12/9. Early Saturday morning, 12/10, we will travel on Light Rail from Littleton to downtown Denver for an all-day scavenger hunt. We expect to return late afternoon on 12/10. Scouts will need to outfit themselves with the appropriate equipment for a day hike during the winter in downtown Denver (warm clothes, jacket, gloves, hat, raincoat, water, sunscreen, hiking boots/shoes, money, etc.). **Be prepared!**

Due to the uncertainty of the weather, we cannot predict what the conditions will be. It could very well be low temperatures, windy, rainy or even snowy conditions. Precautions to provide a safe and enjoyable experience will be taken, but there can be no guarantee of absolute safety against injury or accident. In recognition of the inherent risks of attending the Urban Survival Outing, I (and for or on behalf of my child participant) assume full responsibility for personal injury, accidents and illness, including death, that may occur from my child’s (or my) participation.

I acknowledge that I understand the risks associated with participating in the Urban Survival Outing (whether outlined herein or not) and do hereby release, forever discharge and agree to hold harmless the Boy Scouts of America, Troop 114 and any of its adult leaders from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by me or my child while participating in the Urban Survival Outing.

Urban Survival Outing Participant

I have read the above and understand the risks associated with this campout and agree to come fully prepared for Fall/Winter camping conditions.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(Parent / Guardian permission & acknowledgement)**

We are the parents or legal guardian(s) of this participant, and hereby grant our permission for him to participate fully in the Science Campout and hereby give our permission to take him to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. Further, should it become necessary for our son to return home due to medical reasons, disciplinary action or otherwise, we hereby assume all transportation costs.

Parent / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Medications to be taken on trip: \_\_\_\_\_

(All medications should be given in their original containers to the trip leader prior to departure)