

Permission Slip

'Eco-Explorer Nature Walk' Field Trip

Monday, October 15th, 2007

Troop/Group: 353

Type of activity: Nature Walk

Date: Monday, Oct. 15th

Time: 4:00-5:30 p.m.

Location: Lake County Forest Preserve / Discovery Museum – Wauconda, IL

*enter off 176, proceed straight ahead, paved becomes gravel road, up ahead on left is a large playground and large octagon shelter.

Arrangements for transportation

On own – carpool acceptable

Leaders accompanying the girls

Name: Jeanette Collier, Sue Skowron, Lisa Potgeiter, Linda Kraus

Phone: 847-867-7387

Each girl will need: gym shoes, weather-wise clothing

Cost will be: \$0

To cover expenses for: n/a

(tear off and return)

My daughter _____ has permission to participate in ('Nature Walk' Discovery Museum on Oct. 15th 2007).

She is in good physical condition and has not had any serious illness or operation since her last health examination.

During this activity, I may be reached at: phone: (_____)_____.

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Name: _____ Address: _____

Relation to participant: _____ Phone: (_____)_____

Physician's name: _____ Phone: (_____)_____

Special health considerations: _____

The bearer of this letter has my permission as parent or legal guardian to act on my behalf in any emergency dealing with the health and welfare of my daughter and to obtain emergency treatment for her by a licensed physician.

Yes _____ No _____

I understand that only girls and adults registered with GSUSA are covered by the limited accident insurance.

Yes _____ No _____

Date: _____

Signature of parent or guardian: