

# Girl Scouts of Western Ohio

## Permission Slip

Must be completed ANYTIME your troop goes ANYWHERE away from their usual meeting place.

Return the bottom portion of this form to Leader by (date): \_\_\_\_\_

Troop #: \_\_\_\_\_ is planning a: Day Trip Camp Ernst

Date(s): May 13 Time: 8:00 am -6:00 pm

Location: YMCA Camp Ernst Phone: (859) 586-6181

Mode of Transportation: Car

Place of Departure: \_\_\_\_\_ Time: \_\_\_\_\_

Place of Return: \_\_\_\_\_ Time: \_\_\_\_\_

### Adults Accompanying the Leader:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Each Girl Will Need:

Expenses \$: \_\_\_\_\_ Equipment: \_\_\_\_\_

### Contact In Case Of Emergency:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_



Cincinnati	Dayton	Lima	Toledo
513-489-1025	937-275-7601	419-225-4085	419-243-8216
800-537-6241	800-233-4845	800-962-7753	800-860-4516
<a href="http://www.girlscoutsofwesternohio.org">www.girlscoutsofwesternohio.org</a>			



✂ -----

My daughter, (name): \_\_\_\_\_

Has my permission to attend: \_\_\_\_\_

She is in good physical health and does not have any serious illness or has not recently had an operation. Her updated health form is in the leader's possession or is being returned with this form with information updated (as needed) and signed on the back.

During the activity, I may be reached at:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I understand that my child will not be released to any person other than the above named or myself. I understand that, for my daughter's protection, all persons will be asked for identification. Persons named above should be prepared to provide identification to the satisfaction of the leaders in charge (i.e. current driver's license with photo identification).

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