

**TROOP 412**  
**February 2010 FUNAPALUZA**  
**Camp Wa-kon-da**

WHERE: **Camp Wa-kon-da - Bellevue, Ne.**

WHEN: **DEPART:Feb 26th @ 6:00p.m.**

**RETURN: Feb. 28th around 12:00p.m.**

**ALL Scouts & Drivers DEPART & RETURN Zion Lutheran Church**

**EQUIPMENT: Sleeping bags ,sleeping mat, gloves, hats, coats. Be Prepared! Cold nights..... Will be inside but have these items in case needed. Snacks but make sure enough for everyone**

**FOOD/FEE: \$ (CASH ONLY/ NO CHECKS)**

**PERMISSION SLIPS/FEEES NEED TO BE TURNED IN BY**  
**MONDAY, 02/15/10!!!**

----- DETACH HERE -----

**Boy Scout Troop 412**

**Parent Permission - Medical Release for Emergency Treatment**

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_, a minor child, hereby gives my permission for \_\_\_\_\_ to attend the Boy Scout Troop 412 function to be held at camp Wa-kon-da. I further understand that there may be risk that could result in injury or death. Should \_\_\_\_\_ be injured or become ill so as to require emergency treatment during the course of the Scout function, I hereby delegate to the leaders of Troop 412 all powers of parenthood regarding the medical or dental care and custody of such minor child. In consideration of the benefits derived and after carefully considering the risk involved, and in view that Boy Scouts of America is a Non-profit organization, I hereby release and hold harmless, and waive all claims I may have against Boy Scouts of America, Mid-America Council, BSA, activity coordinators, all employees, volunteers, or other organizations associated with **Camp Wa-kon-da**. This instrument shall not be affected by the disability or incapacity of its principal, and shall expire at the time my minor child is returned to my custody following the conclusion of the above-referenced Scout function.

**Driver Information**

***Parents: We appreciate your offer to drive!***

\_\_\_\_\_ I will drive to camp.

\_\_\_\_\_ I will drive from camp.

\_\_\_\_\_ I will drive and camp for the weekend.

Date: \_\_\_\_\_

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

Emergency Contact or Cell #(s): \_\_\_\_\_

-----

**Scout Account Funds Transfer**

Transfer \$\_\_\_\_\_ from my son's Scout Account to be used for food fee for this campout.