

Parent/Guardian Consent and Approval for Resident Camp

(Applies to all participants under the age of 18)

Scout (Print Name): _____ Date of Birth: _____

Address: _____ Phone: _____

has my permission to participate in Boy Scout Resident Summer Camp, or High Adventure Base Activities, at Camp Kern, Oljato, or Mirimichi located at Huntington Lake California during the summer of 2003. I approve of the unit leaders who will be in charge of the care and supervision of my child. I also certify that to the best of my knowledge the Scout or Venture hereon is physically fit to engage in the activity described above.

Signed: _____ Date: _____

Print Name: _____ Relationship: _____

Activity Permission Form

Participants may attend camp with out this section signed but it MUST be signed for them to participate in any of these activities.

AUTHORIZATION & CONSENT TO A MINOR

MINOR'S NAME _____ UNIT NUMBER _____

Pursuant to California Penal Code, Section 12552 The undersigned do hereby authorize that the rifle range instructor of the Southern Sierra Council, BSA may furnish a firearm/bow to the above minor for the purpose of instruction in the safe handling and shooting of firearms and related activities. This authorization will remain in effect while the above minor is en route to or from, or involved in, or participating in, any Boy Scout program or activity of the Southern Sierra Council, Boy Scouts of America, unless revoked in writing by the undersigned, and delivered to the aforesaid agent. *Scouts may not shoot a rifle without written parental consent*

I authorize: Archery _____ Firearms _____
Initial Initial

Climbing / COPE Parental Informed Consent and Hold-Harmless - I understand that participation in climbing and COPE activities offered at Camp's Kern, Mirimichi, and Oljato involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after careful considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my child, I have given the above named consent to participate in:

I authorize: Climbing Wall _____ Rock Climbing* _____ COPE (High Ropes) * _____
Initial Initial Initial

** Only for Climbing Camp Participants*

I wave all claims I may have against the Boy Scouts of America, activity coordinators, all employees, volunteers, or sponsors associated with the above approved activities.

Legal Guardian _____ Date: _____

Authorization and Consent to Treat a Minor

Pursuant to California Civil Code Section 25.8

The undersigned does hereby authorize the Adult Leaders of my child's Scouting Unit, Medical Personnel, or Camp Director of Camp Kern or Mirimichi, or such substitute as they may designate as agent for the undersigned to consent to any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to the above minor which is deemed advisable by and to be rendered under the general or special supervision of any physician and surgeon, licensed under the provision of medicine practice act or any dentist licensed under the dental practice act, whether such diagnosis or treatment is rendered at the office of said physician or dentist, at a hospital, Scout Camp, or elsewhere. This authorization will remain effective while the above minor is enroute to or from or participating in any Boy Scout program or activity of the Southern Sierra Council, Boy Scouts of America, unless revoked in writing by the undersigned and delivered to the aforesaid agent.

Date: _____ Signed Parent or Guardian: _____

In Case of Emergency Please Notify: _____ Phone: (H) _____

Address: _____ Phone: (W) _____

Medical Insurance Information:

Company or Provider: _____

Phone: _____ Policy/Group Number: _____

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