**Troop 216**

**YMCA Lock-In**

**January 24, 2020**

**PLACE:** Niebur (ESIC) Center YMCA 1200 Esic Drive, Edwardsville, IL 62025

**ARRIVAL:** Friday January 24 – 8:30pm check in

**DEPART:** Saturday January 25 – Pick up scout before 6:50am. No scout may drive himself.

**FOOD:**          Pizza, hot dogs, chips, nachos, sodas, water, fruit, cookies

**COST:** $22.00/scout No cost for adults

**WEAR:** Class B shirt and appropriate clothing/towel for activities of swimming, racquetball,

basketball, and other physical games. Electronics permitted.

**EMERGENCY:** Martina Bishopp 314.496.3312 Tara Kuhne 618.334.8352

Niebur Center618.656.0436

**PLEASE return this permission slip and payment to**

**Mrs. Bishopp or Mrs. Gill by 7:30 PM on Monday, January 20, 2020**

**---------------------------------------Return bottom portion with payment --------------------------------------**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent’s name) give permission for my son, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name) to attend and participate in all activities that are planned.  I/we give permission to any medical institution, person, or Scout Leader to render emergency treatment in the event of a medical emergency.  My son is in good health and (circle one) is / is not taking any medications. In the event medications are needed, I will give them to the Leader in the original container with written instructions. Please note any pertinent health concerns:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ In the event of an emergency, please contact the following:

|  |  |  |  |
| --- | --- | --- | --- |
| **CONTACT NAME** | **HOME PHONE #** | **CELL PHONE #** | **RELATIONSHIP** |
|  |  |  |  |
|  |  |  |  |

SIGNATURE(S):

\_\_\_\_\_\_    Adult planning to attend/stay overnight. Name(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_ Please transfer $\_\_\_\_\_\_ from my scout’s account to cover fees for this activity \_\_\_\_(initials)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| FOR TROOP TREASURER:  Rec’d\_\_\_\_\_\_\_\_\_\_(date)  by \_\_\_\_\_\_DG\_\_\_\_\_\_\_MB | YMCA Lock-In Jan 24, 2020 $22/scout $0/adult   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Amount | Cash | Check # | Scout Account | Notes | |  | ☐ |  | ☐ |  | |  | ☐ |  | ☐ |  | |  | ☐ |  | ☐ |  | |