

Scout Name: _____ (please print - one scout per form)

Permission to Administer Over-the-Counter Medication

Over the counter pain relievers/medication may be administered to my son on a Scouting event (as needed) by the Designated Troop Tour Leader:

Check below and Initial Permission here _____
Initial

- | | |
|---|---|
| <input type="checkbox"/> Acetaminophen (ie. Tylenol) | <input type="checkbox"/> Pepto Bismal - chewable |
| <input type="checkbox"/> Ibuprofen (pain Reliever) | <input type="checkbox"/> Mylanta - chewable |
| <input type="checkbox"/> Anti-histimine/Decongestant (ie. Benadryl) | <input type="checkbox"/> Other Over-the-Counter Meds: _____ |

Emergency Scout Release

When returning from a camp out, normal practice is to call the parents prior to the troops arrival at the school so that you can be on hand when the troop arrives. If you will not be able to pick-up your son after the outing you need to make arrangements with another parent, friend or relative to pick-up your son and communicate this to the Tour Leader (Scoutmaster or his designee) and the Outdoor/Activities Coordinator prior to the troops departure for the activity. The contact telephone number for the person picking up your son needs to also be provided on the Permission Slip.

Emergencies, car break downs, and other unforeseen things do occur. In the event that you are not able to pick-up your son after an outing, and have not made prior arrangements as noted above, the troop leaders will follow your instructions below.

If I am **not able to be contacted** and am unable to pick-up my son after an outing I give permission to the troop adult leaders to release my son as follows:

_____ be released to the following scout families:
Initial

Name _____ Phone: _____

Name _____ Phone: _____

Name _____ Phone: _____

_____ be released to a neighbor or relative listed below.
Initial

Name _____ Phone _____ Relationship _____

Address _____

Name _____ Phone _____ Relationship _____

Address _____

I (we) understand that these procedures are only for unusual circumstances when I (we) can not be reached and are **NOT** to be used as routine procedure. I (we) understand that normally scouts are to be picked up at the school after an outing by a parent or other family member.

This Release Form will remain in effect until revoked in writing or updated with a new form. A copy of this form will be kept in the Troop Leader's Binder.

Parent/Guardian _____ Date _____
Signature

Parent/Guardian _____ Date _____
Signature