

**Boy Scout Troop 188**  
Haunted House Weekends –BDSR  
Information and Permission Slip Form

Troop 188 has volunteered to setup and run the Haunted Castle at Cub Camp at BDRS during the month of October. This event is a big hit with the Cub Scouts and a key part of the Haunted Weekends for the Camp. The schedule of events is listed below.

- October 4<sup>th</sup>: Set up Haunted Castle: Leave Linton Parking Lot @ 8:00 AM (lunch will be provided) Return Time: TBD (5:00 PM?)
- October 11<sup>th</sup>: Run the Haunted Castle: Leave Linton Parking Lot @ 2:00 PM (leave time might change) Return time approx. 11:00PM (dinner will be provided)
- October 18<sup>th</sup>: Run the Haunted Castle: Leave Linton Parking Lot @ 2:00 PM Return time approx. 11:00 PM (dinner will be provided)
- October 24<sup>th</sup> -26<sup>th</sup>: Campout, Run Haunted Castle, Tear down Haunted Castle on Sunday, Leave Linton Parking Lot 4:00 PM Friday, Return Sunday 2:00 PM

The Troop Will Not Need Their Class A Uniforms For Any Of These Dates

**Permission Slip**

As the parent or legal guardian of \_\_\_\_\_, I hereby give my permission for him to participate in the Haunted Weekends during the month of October. I give permission to the leaders of Troop 188 to render First Aid, should the need arise. In the event of an emergency, I also give my permission to the attending adults to seek emergency medical treatment, as needed. I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing except for clear acts of negligence.

In case of emergency, I can be reached by phone at \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Guardian)

As a condition of my participation in this activity, I agree to conduct myself in a manner consistent with Scouting principles, and to abide by the rules set forth in the Scout Law, Oath and the Outdoor Code.

(Scout) Signed: \_\_\_\_\_ Date: \_\_\_\_\_