

**Parental Informed Consent Agreement
For Climbing & Rappelling Activities**

I understand that participation in the Climbing & Rappelling Campout activity offered through Troop 890, Circle 10 Council, BSA, on September 23, 2011 – September 25, 2011, involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully 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 son, I have given _____ (name), my son, my consent to participate in the Climbing & Rappelling Campout on September 23, 2011 – September 25, 2011.

I understand that participation in the Climbing & Rappelling Campout involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering the risk involved and in view of the fact that the Boy Scouts of America is a not-for-profit organization, I hereby release and hold harmless, and waive all claims I may have against Boy Scouts of America, Circle 10 Council, BSA, Longhorn Council, BSA, activity coordinator(s), all employees, volunteers, or other organizations associated with the Climbing & Rappelling Campout.

In case of emergency, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

Signature of Parent or Guardian

Printed Name: _____

Date

In case of emergency, please contact:

Name: _____

Phone: _____ () Home () Cell () Work