

Scout Personal Data

Name: _____ Nickname: _____

Home Address: _____

Scout E-mail: _____ Parent E-mail: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Current Grade: ____ Cub Scout: __/__/__ - __/__/__ Highest Cub Badge: _____

Joined Troop 1054: __/__/__ Date of Birth: __/__/__ SSN: _____

Medical Alert Information: _____

Father's full name: _____ DOB: ____/____/____

Employer: _____ Occupation: _____

Work Phone: (____) _____ Cell Phone: (____) _____

Mother's full name: _____ DOB: ____/____/____

Employer: _____ Occupation: _____

Work Phone: (____) _____ Cell Phone: (____) _____

(Vehicle/Driver License information is required by BSA if you drive for any scouting activity)

Father's Drivers License Number/State: _____

Mother's Drivers License Number/State: _____

Vehicle(s):					Insurance:	Per Person	Accident	Property
_____	_____	_____	_____	_____		\$ _____	\$ _____	\$ _____
Year	Make	Model	#Belts	Plate #				
_____	_____	_____	_____	_____		\$ _____	\$ _____	\$ _____
Year	Make	Model	#Belts	Plate #				

BLANKET PERMISSION SLIP

As the parent or legal guardian of _____, I hereby give my permission for him to participate in any and all outings with Boy Scout Troop 1054.

I give permission to the leaders of Troop 1054 and camp staff of the Bay Lakes Council to render First Aid, should the need arise. In the event of an emergency, I also give permission to the physician selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment, as needed. I further agree to hold the above named unit, Council, and its leaders blameless for any accidents that might occur during an outing except for clear acts of negligence.

In case of emergency:

I can be reached by phone at _____ or _____.

If I cannot be reached please contact the following person:

_____ at _____ or
(Telephone #)

_____ at _____
(Telephone #)

Print name: _____
(Parent or Guardian)

Signed: _____ Date: _____

Bay-Lakes Council
Boy Scouts of America