

**PARENT'S CONSENT FORM FOR A TRIP
CAMP FIRE USA SNOHOMISH COUNTY COUNCIL
4312 Rucker Ave, Everett, WA 98203**

Dear Parents: Date: _____

Our club is planning to go on a trip to _____

Date of Trip _____ Time of Departure _____

Place of Departure _____

Time of Return _____ Place of Return _____

Cost of Trip _____ Food _____ Misc. _____

For the safety and supervision of your child, Little Stars, Starflight and Adventure Clubs must be accompanied at all times by a minimum of two adults or one adult and one Apprentice Club Leader*. Starflight kindergarten clubs with more than 8 members must have an additional adult for every 4 additional youth. First and second grade Starflight clubs with more than 12 members must have an additional adult for every 6 additional youth. Adventure clubs with more than 16 members must have an additional adult for every 8 additional youth. Discovery and Horizon clubs must be accompanied at all times by a minimum of two adults 18 years of age or older. Clubs or activities with more than 20 youth must be supervised by an additional adult for every 10 youth. *an adult is age 18 or older with the exception of the Apprentice Club Leader who is 15 through 17 years old, has completed club leader training and has on-going supervision.

The drivers are: _____

If there is any undue delay in getting home, I will get in touch with:

Name _____ **Address** _____ **Phone** _____

The section at bottom of this form must be signed and returned to me before your child goes on the trip. If there is any condition of health that should be watched for while on the trip, please include a statement on it.

Leader's Signature

I am familiar with the proposed destination, _____ the mode of transportation, the leadership accompanying the club, that all drivers are licensed and at least 21 years old, and other circumstances of this activity. I certify that my child is in good health and can participate in all the normal activities of the club. (State any exceptions below). I understand that reasonable measures will be taken to safeguard the health and safety of the members and that I will be notified as soon as possible in case of an emergency. However, in the event of sickness or accident, I will not hold the club leaders or Camp Fire responsible. In case of sickness or accident, I authorize the calling of a doctor and/or the providing of other necessary medical services at my expense.

Child's Name _____

Parent or legal guardian's signature _____

Phone _____ **Address** _____ **Date** _____

Person other than parent (**for emergency use**):

Name _____ Phone _____