

BOY SCOUT TROOP 50



EVENT: Whitewater Raft-o-Ree Campout May 17-19, 2024
LOCATION: Whitewater Challengers in White Haven, PA
LEAVING FROM: VFW. Be there by 5 PM, Friday, May 17
 (or meet us at Whitewater Challengers at 9 AM Saturday to Raft.)
RETURNING TO: VFW. Sunday, May 19, before 12 PM. We'll call.
COST: All Weekend- **\$110** (SMs- **\$88**) Day Rafting only- **\$88** (Lunch is included)
 (Need financial help? Call Mr. Lareau! Don't miss this incredible adventure!!)
TRIP LEADER: Mr. Lareau: Cell: 973-479-6865.

- NOTES:**
- **Friday night** we'll be camping at a Whitewater Challengers campsite.
 - **Saturday** we'll be rafting through the beautiful Lehigh River Gorge and camping at the Whitewater Challengers campsite. (Wet suit tops are included.)
 - **Sunday** we'll return home after breakfast. (We won't be biking.)
- PARENTS ARE INVITED TO ATTEND and RAFT on Saturday, but not CAMP.**
- You can: **Do it all**, or come for the day on Saturday and raft only and leave Saturday evening
Note: Those not attending the entire weekend will be responsible for their own transportation.
 - **All** must be Boy Scout Swimmers to raft. We'll be running a swim test.
 - Saturday evening, the camp will provide a program and other fun campfire activities.
 - Patrol cooking: Saturday and Sunday. (Saturday bag lunch on the river provided by the outfitters.)
 - Bring a Bag Dinner for Friday and water bottles in a day pack for the raft trip.
 - Bring: Sleeping bag and mat, swim suit, towel, water shoes or old sneakers (no Crocs or flip-flops), toilet gear, and extra warm clothes and socks. **ALWAYS BRING RAINGEAR.** Bring your black Troop 50 T-shirt.
 - All attending must complete the "**Release of Liability**" form along with this permission slip. We'll get the Release to you before the event.

PERMISSION SLIPS and PAYMENT are due by the April 18 TROOP MEETING to guarantee a spot.

-----Tear off here and retain the top half for your records-----



Whitewater Rafting Campout May 17-19, 2024

Whitewater Challengers in White Haven, PA

SCOUT'S NAME: _____ AGE: _____
 ADDRESS: _____
 HOME PHONE: (____) _____ EMERGENCY PHONE: (____) _____

Scout will attend: The entire weekend ____ Saturday Rafting only: ____ Other time period _____
 See Prices above. **List names of parents attending on back.** (Only registered adults can camp.)

The above named Scout has my permission to attend this activity. He may participate in all activities programmed, except for those noted here:			
Does he have any current medical conditions or allergies we should be aware of? Please describe on the reverse side with any special instructions.	<table border="1" style="display: inline-table;"> <tr> <td style="padding: 5px;">YES</td> <td style="padding: 5px;">NO</td> </tr> </table>	YES	NO
YES	NO		
Will he taking any medications on the trip?	<table border="1" style="display: inline-table;"> <tr> <td style="padding: 5px;">YES</td> <td style="padding: 5px;">NO</td> </tr> </table>	YES	NO
YES	NO		
If YES- Please provide a Troop 50 Medication Information Form with dosage, when it needs to be administered, etc. (Download from the Troop 50 Website.)			
If in the judgment of the Scout leaders in charge, it becomes necessary to send my son to a nearby hospital, physician, or dentist for diagnosis and/or treatment, they have my full permission to do so. Further, should medical treatment be necessary, it may be administered. I will assume full financial responsibility for any medical expenses that are incurred.			

PARENT / GUARDIAN SIGNATURE: _____ **DATE:** _____

NOTE: PERMISSION SLIP and PAYMENT are due by the April 18 TROOP MEETING

Waiver in? _____ Amt. Paid: _____ How Paid: _____