

Hey Scouts, ***sign up quick !*** – our Discover Scuba Activity is now Saturday March 10th. Sign up Soon to reserve your spot.

A SIGN UP SHEET will be at the troop meetings. You can EMAIL Mr. Galvin at (timothy.p.galvin@delphi.com) in order to sign up too - then, bring your permission slip to the troop meeting – the form is attached.

Saturday March 10, 2012

Cost is \$ 20.00

Meet at Fenton Collision at 2:15

We will return to Fenton Collision at 5:30pm



[scuba in the pool.jpg](#)

Thanks,

Jordan Dagenais
T219 ASPL
810-750-8155

Mr. Galvin
T219 SM
810-360-7154

Troop 219 Discover Scuba Activity
Saturday, March 10, 2012
PERMISSION SLIP & HEALTH FORM



[scuba in the pool.jpg](#)

(RETURN-WITH \$20.00 PAYMENT AT January 9th SCOUT MEETING)

REGISTRATION: Adult or Scout's Name _____

Method of Payment: Individual's Account _____ OR

Check Amount and Number _____ OR

Cash _____

_____ (name) has my permission to attend the Troop 219 Discover Scuba Activity beginning at 3:00 P.M. Saturday March 10th, at the Flint Dive Shop in Flint, Michigan.

Transportation will be arranged for by the Troop.

Drop off Scout with equipment (swim suit and towel) at Fenton Collision at 2:15 P.M.

Pick up Scout at Fenton Collision between 5:30 P.M. and 5:45 P.M.

In the event of an emergency, and I cannot be reached by telephone or other reasonable means, I hereby give my permission to the physician selected by the adult leader in charge to hospitalize, secure proper anesthesia, order injections, surgery and do whatever appears medically necessary for my child.

Medical Insurance Company: _____

Medical Insurance Numbers: _____

Allergies or other medical information: _____

Signature of Parent or Guardian: _____ Date-_____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Tel. No: () _____ Alternate Tel. No: () _____

Person to contact in an emergency if parent/guardian cannot be reached:

Name: _____ Relationship to Scout: _____

Telephone Number: () _____ or ALTERNATE NUMBER: () _____