

Rimrock Acres 4-H Challenge Club Permission Slip for Challenge Activity

I, _____, give my permission for my
Parent/Guardian name
son/daughter, _____, to participate in the canoeing
Challenge Member's Name
trip to the Cadillac, MI. I understand they will depart on Friday, August 18 at 8:00
a.m. and are scheduled to return on Sunday, August 30th, at about 6 p.m.. Challenge
members will be traveling in a bus, vans, trucks and cars.

*The Rimrock Acres Challenge Leaders work hard to avoid any incidents while on a trip. However, parents and members must realize that the activities we are undertaking are dangerous and involve inherent risks. All participants must understand these risks and provide all needed medical information before participating in this trip.

Parent/ Guardian Signature

Date

As a parent/guardian I understand that if my child must return home because of illness, injury or bad behavior, it will be my responsibility to pick them up at their location. I will be contacted by phone and my child must be picked up in a reasonable amount of time so that the rest of the trip can continue for the remaining members.

Parent/ Guardian Signature

Member Signature

Date

Parent's Emergency Phone Number: (List all that apply)

PLEASE LIST ANY AND ALL MEDICATIONS YOUR CHILD MUST TAKE OR WILL BE BRINGING WITH THEM ON THIS TRIP:

PLEASE LIST ANY ALLERGIES/MEDICAL CONDITIONS THAT YOUR CHILD MAY HAVE: