

ACTIVITY DESCRIPTION AND PERMISSION SLIP  
BOY SCOUTS OF AMERICA, WESTARK AREA COUNCIL  
RAZORBACK DISTRICT, TROOP102  
FAYETTEVILLE, ARKANSAS  
Caving at MadCoW

Saturday February 16-17, 2008

Who: Troop 102 Scouts, and Scout Leaders

What to bring: Personal Camping gear, hiking boots, loose pants or spandex(zip-off hiking pants-okay), knee and elbow pads, gloves, polyprop-top-long sleeve, cotton tee, 2 liters of water, pee-bottle, , lunch & snack, large trash bag, small first aid kit, 2 flashlights, and a small pack to carry it all. Additionally, bring a change of clothes for the return trip and \$10.00 for food.

When: Meet at 7:45 AM, Saturday, at the Central Methodist Church Boy Scout Room. Senior Scout: Kris Swafford. Adult Scout Leaders: Charles Brickey and Bud Schwartz. Return Sunday about 12:30 AM or as weather requires.

Where: Sassafras Cave or Whippoorwill Cave in the Madison County Wildlife Management Area.

**How: Church Van or Personal Vehicle**

I understand that participation in the trip, hiking to the cave and caving involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering the risk involved, and in view of the fact that the BSA is an organization in which membership is voluntary, and having full confidence that precaution will be taken to ensure the safety and wellbeing of my son, I have given \_\_\_\_\_ (Son's Name) my consent to participate in the Fitton Cave Trip and waive all claim I may have against the BSA, the Westark Area Council, the Razorback District, Troop 102, the activity coordinators, all employees, volunteers, or sponsors associated with the event. In case of emergency, I understand every effort will be made to contact me. In the event I cannot be reached, I here by give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, of injections of medication for my child. In case of emergency, I can be reached by telephone at \_\_\_\_\_ or at \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
\_\_\_\_\_  
(Parent or Guardian)