INFORMED CONSENT AGREEMENT

I understand that participation in the _____ offered through the
(Activity)

_____ Council, Boy Scouts of America, involves a certain degree of risk. I have

carefully considered the risk involved and have given _____, my (son/daughter),
(Name)

my consent to participate in _____ on _____
(Activity) (Dates)

This form must have both parent/guardian signature(s):

_____ _____
Name (Please print.) Name (Please print.)

_____ _____
Signature Signature

_____ _____
Date Date

Telephone number(s) (area code included) _____