

## **Trip, Activity or Event Permission Slip**This form is used for Troop trips, activities or events outside of regular Troop meetings.

Please return this form to the Troop by:			
Girl Name			
Troop number			
Trip, activity or event information	Location/facility name		
	Location/facility address		
	Date(s)		
	Time(s)		
	Leaving from/Returning to		
	Activities include		
Emergency Contacts		Name	
		Relationship	
		Phone number	
		Name	
		Relationship	
		Phone number	
My daughter can be released to the following people:			
I have submitted a Health and Medical Form which has my daughter's current health information.		Yes	
As the parent/guardian I authorize my daughter to part		No nter to participate in the	e above AHG Troop trip, activity or event.
Parent/guardian signature			
Date			