

**CAMP FIRE: SNOHOMISH COUNTY COUNCIL**  
**4312 Rucker Ave, Everett, WA 98203**  
**Parent Consent Permission Slip**  
**Killoqua Work Party**

**Dear Parents:**

Date: **Sunday Feb 21, 2010**

Our club is planning to go on a trip to **Camp Killoqua**

Date of Trip **Sunday Feb 21** Time of Departure **12 noon** if carpooling from office or meet at Killoqua at **1pm**

Place of Departure **Same**

Time of Return **3:30** leave Camp if carpooling return to office by **4ish** Place of Return **Same**

**Wear painting clothes and something warm for cook out.**

**Bring your own drink.**

For the safety and supervision of your child, Starflight and Adventure Clubs must be accompanied at all times by a minimum of two adults or one adult and one Apprentice Club Leader\*. Starflight kindergarten clubs with more than 8 members must have an additional adult for every 4 additional youth. First and second grade Starflight clubs with more than 12 members must have an additional adult for every 6 additional youth. Adventure clubs with more than 16 members must have an additional adult for every 8 additional youth. Discovery and Horizon clubs must be accompanied at all times by a minimum of two adults 18 years of age or older. Clubs or activities with more than 20 youth must be supervised by an additional adult for every 10 youth.

\*an adult is age 18 or older with the exception of the Apprentice Club Leader who is 15 through 17 years old, has completed club leader training and has on-going supervision.

The drivers are: **Parents are responsible for transportation**

If there is any undue delay in getting home, I will get in touch with:

**Holly DTIA Advisor cell 425-268-2301**

The section at bottom of this form must be signed and returned to me before your child goes on the trip. If there is any condition of health that should be watched for while on the trip, please include a statement on it.

**Leader's Signature\_Holly Huscka DTIA Advisor**

I am familiar with the proposed destination, **Camp Killoqua** the mode of transportation, the leadership accompanying the club, that **all drivers are licensed and at least 21 years old**, and other circumstances of this activity. I certify that my child is in good health and can participate in all the normal activities of the club. (State any exceptions below). I understand that reasonable measures will be taken to safeguard the health and safety of the members and that I will be notified as soon as possible in case of an emergency. However, in the event of sickness or accident, I will not hold the club leaders or Camp Fire responsible. In case of sickness or accident, I authorize the calling of a doctor and/or the providing of other necessary medical services at my expense.

**Youth Name**

**Parent or legal guardian's signature**

**Phone or CELL**

**Address**

**Date**

Person other than parent (**for emergency use**): Name \_\_\_\_\_ph number

