



**Details:** The Scouts of Troop 72 have been dreaming of going to The Park at the Mall of America ever since last summer. Since there is no school Tuesday, February 20 (and as far as I know, Minnesota has a regular school schedule), that seems like the perfect time. The mall will give discounts to non-profit groups who reserve in advance, so we can get all-you-can-ride wristbands good for five hours for only \$12 each! We also might choose to go to REI, a great outdoor/camping store only a couple miles from the Mall, depending on the weather and how tired everyone is. Your boy might want to bring money to buy camping equipment, along with the spending money he'll need for any food needed during the day. NOTE: Boys must always be with at least one buddy, but **there will NOT be constant adult supervision**, as small groups of boys will be headed in different directions all the time. If you're unsure whether your son can accept this level of responsibility, you may want to pass on this trip.

Retain the above information and return the form below with any money by 7:00 p.m. <u>Monday, February 19, 2007</u>. (Because of the late notice, I am willing to take a verbal commitment Monday night, but we need to make sure we have enough transportation, and we WILL need the permission slips before we leave Tuesday.)

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Amuse	ment park at Mall of America (Blooming	gton, MN)
Dates:	Tuesday, February 20, 2007	
Fees:	<pre>\$from boy's account + \$</pre>	enclosed o

losed check = \$15.00

(make checks payable to "Troop72.com")

In consideration of the benefits to be derived, and in view of the fact that the Boy Scouts of America is an educational institution, membership in which is voluntary, and having full confidence that every precaution will be taken to ensure the safety and well-being of my Scout son/ward, namely:

First	MiddleLast
	ive all claims against the leaders of this trip, officers, agents and representatives of the Boy Scouts of
America, and the sponsoring organization, Chippewa Va	alley Bible Church. In the event of an emergency, the troop leader of the activity named above has my
permission to obtain medical treatment for this Scout at t	the nearest hospital or doctor, at my expense, if our own doctor is not readily available, and as
restricted on the Emergency Data Sheet on file with the	
() Yes, I will attend this activity with my son(s)	
() Yes, I can drive (to / from) this activity; I can fit	scouts in my car
Signature of parent or guardian:	Date:
EMERGENCY INFORMATION: (In addition to Pers	onal Health and Medical Records.)
During the activity listed above, I (parent/guardian) can	be contacted at the following phone number(s):
()	()
This scout is highly sensitive to:	
What, if any, medication is this Scout taking?	
Any special instructions for this medication?	
Do you want the activity leader to carry the medication?	
(use back of this page for additional information or expla	
Date of last tetanus shot/booster:	Date of birth:
MEDICAL INSURANCE INFORMATION	
Company:	
Policy Number:	Parent's SS#:
Questions? Call Tom Arneberg (726-4074) or see the w	ww.troop72.com.web.page