

TROOP 1001  
Trinity Bible Church (TBC)  
March 26, 2008

To Parents and Scouts:

Troop 1001 will be camping at Camp Cherokee at Clements Scout Ranch near Athens, Texas, for the North Trail District Camporee April 4-6, 2008. Scouts should be at the church parking lot **no later** than 5:30 p.m. on Friday evening in Class A uniform. We will be returning about 12:30 p.m. Sunday to the hospital parking lot across from TBC.

Be sure to wear your **full** Class A uniform, including **neckerchief, belt, socks, and 1001 cap**. We want to look sharp. Also be sure to **eat dinner before you arrive Friday night or bring a sack dinner** because the drive will be non-stop.

The following equipment is recommended:

Class A uniform (worn), <b>including neckerchief</b>	Money for patrol food (\$10, paid Monday)
<b>Sack Supper for Friday</b>	Scout Handbook
Backpack or duffel bag	<b>Sturdy Shoes or Boots</b>
Sleeping bag	Foam Pad or Air Mattress
Waterproof Ground Cloth	<b>Raincoat or Poncho</b>
Clothes – check the weather forecast	Small Flashlight
Water Bottle or Canteen	Watch and Compass
Toilet Articles & Chapstick	Cup/Plate/Knife/Fork/Spoon (do <u>not</u> bring disposable)
Personal 1 <sup>st</sup> Aid kit	Wide Brim Cap
Notebook / Pencil	Sun Screen / Insect Repellent
<b>Jacket</b> / Coat	

DO NOT BRING: Electronics (radios, tape players, cd/dvd players, mp3 players, handheld games) or aerosol sprays, sheath knives, candy, gum or soft drinks.

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PERMISSION SLIP

My son \_\_\_\_\_ has my permission to attend the North Trail District Camporee at Camp Cherokee at Clements Scout Ranch near Athens, Texas on the weekend of April 4-6, 2008. I hereby authorize emergency medical treatment as recommended by qualified medical professionals. Medications and special health concerns are noted below.

I am aware of the National Scouting policy that at least two adults must be present during Scout activities. I will not drop off my son until I have verified that two adults are present. I will arrive on time Sunday to pick up my son so Troop leadership does not have to wait for me.

DATE: \_\_\_\_\_ PARENT'S SIGNATURE \_\_\_\_\_

Medications and special health concerns: