



## District/Sectional Merit Camp Permission Form

I am the parent or guardian of \_\_\_\_\_ who is a member of the Royal Rangers Program.

Please consider this document as written consent for my son \_\_\_\_\_ to participate in any of the Merit Camp activities supporting the following merits:

- Emergency preparedness
- Fire Safety
- Safety
- Crime prevention
- Finger printing
- Law enforcement

I will hold harmless any and all leaders or officers of any unforeseen accidents, even though great care for safety is always taken.

\_\_\_\_\_  
Signature of parent or guardian date

If you do not want your son, \_\_\_\_\_ participating in any of the above activities please list: \_\_\_\_\_.

\_\_\_\_\_  
Signature of parent or guardian date

Parent please complete:

Name of minor \_\_\_\_\_

Name of Parent completing form: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone and work phone (\_\_\_\_) h \_\_\_\_\_ w \_\_\_\_\_

Age \_\_\_\_\_ Birth date of minor \_\_\_\_\_

Any Information we should know about: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_