



Cub Scout Activity Control Form and Waiver for Camp Tuscarora

*To be filled out by the Scout's parents or guardian. Please print in ink.
All participants in the following activities must have a completed and signed form.*

Scout's Name: _____ Date of Birth _____

Pack #: _____

Name of parent(s)/guardian(s): _____

Telephone: Day _____ Evening _____ Other _____

Potentially Hazardous Activities: Please check those events your consent for your minor child to participate in.

___ B.B. Guns

___ Archery

___ Swimming

___ Climbing Tower

___ BMX

___ Skateboarding

___ Boating

___ Waterslide

___ All of the above

Waiver of Claims:

In consideration of the benefits to be derived from participation in the activities of the Boy Scouts of America at Camp Tuscarora, any and all claims against the Boy Scouts of America, the officers, employees, agents, or other representatives of any of them, or any other persons working under their direction or engaged in the conduct of their affairs, arising out of any accident, illness, injury, damage, or other loss or harm to/or incurred or suffered by the participant named above or to his or her property, in connection with or incidental to the activities of Camp Tuscarora, including preliminary training and travel, are hereby expressly waived by the participant and the participant's family or guardians.

This is to certify that I, as parent/guardian with legal responsibility for the participant, do consent and agree to his/her release as provided above, I release and agree to indemnify and hold harmless the Boy Scouts of America from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian Signature: _____

Date: _____