

**CONSENT FORM
APPROVAL BY PARENTS OR GUARDIANS**

First name of BSA member/guest	Middle Initial	Last Name
Address	Birth date (month/day/year)	
Additional address (need street address if you have a P.O. Box)		
City ()	State	Zip
Phone Number (parent's daytime)	Phone Number (parent's night time)	

Medical Release

In the event of illness or injury occurring to my son or daughter while involved at this Camporee, I consent to X-Ray examination, anesthesia, and/or medical or surgical diagnostic procedures or treatment considered necessary in the best judgment of the attending physician and performed by or under the supervision of a member of the medical staff of the hospital furnishing medical services.

It is understood that in the event of a serious illness or injury, reasonable efforts to reach me will be attempted.

Insurance Company _____
 Policy# _____
 Physician _____
 Telephone #() _____

Parents or Guardians

I hereby approve and agree to all of the terms, conditions, and waiver of claims of this CONSENT FORM and certify to its correctness. Further, I agree that this BSA youth member or guest can meet the health and physical fitness requirements of this trip and activity.

APPROVAL

(If two parents/guardians both need to sign)

I give permission for my child to attend the Quicksilver District Camporee on April 15 - 17, 2011

Father/Guardian Signature _____	Date _____
Mother/Guardian Signature _____	Date _____

Parents or Guardians

I hereby approve and agree to all of the terms, conditions, and waiver of claims of this CONSENT FORM and certify to its correctness. Further, I agree that this BSA youth member or guest can meet the health and physical fitness requirements of this trip and activity.

Photo Release

I hereby assign and grant to the local council and the Boy Scouts of America the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recording made of me or my child by the Boy Scouts of America, and I hereby release the Boy Scouts of America from any liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/videotapes/electronic representations and/or sound recording without limitation at the discretion of the Boy Scouts of America, and I specifically waive any right to any compensation I may have for any of the foregoing.

-YES -NO

Quicksilver District Camporee
 2011
 Santa Clara County Council