

# MARSHALL PACK 76- 2014 OVERNIGHT LOCK- IN REGISTRATION FORM

The Overnight Lock-in is open to all boys currently enrolled in Marshall Cub Scout Pack 76.  
Each Scout needs to have a **Parent** or **Guardian** in attendance.

A variety of hands-on activities are planned throughout the evening

**Dates: Nov 14<sup>th</sup> – 15<sup>th</sup>**

**Location:** Marshall United Methodist Church  
318 William Street Marshall WI

Scout Name: \_\_\_\_\_

Address, City: \_\_\_\_\_

Home Telephone Number with Area Code: \_\_\_\_\_ Age of Scout: \_\_\_\_\_

Level of Scout (i.e., Tiger, Wolf, Bear, Web I, or Web II): \_\_\_\_\_

Parent Name Attending with Scout: \_\_\_\_\_  
(First Name) (Last Name)

## **Emergency Contact Information During Pack Overnight Lock-in:**

Contact Person in Case of Emergency: \_\_\_\_\_

Relationship to Scout/Parent: \_\_\_\_\_ Telephone No. \_\_\_\_\_

### **PARENTS – PLEASE READ - IMPORTANT**

In consideration of the benefits to be derived from participation in these activities, any and all claims against the Boy Scouts of America, Marshall Cub Scout Pack 76, Holy Trinity Church, Marshall United Methodist Church or against 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 Cub Scout or Parent named above or to his or her property, in connection with or incidental to the activities, are hereby expressly waived by the Parent and the Cub Scout as well as the families and/or guardians of both.

APPROVAL: I UNDERSTAND THE INFORMATION CONTAINED IN THIS REGISTRATION FORM AND THE ACTIVITY HANDOUT AND GIVE MY PERMISSION FOR THE CUB SCOUT LISTED ABOVE TO PARTICIPATE IN THE PACK OVERNIGHT LOCK-IN. I ALSO UNDERSTAND THAT A PARENT MUST BE IN ATTENDANCE AT THIS EVENT.

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT NAME (PLEASE PRINT): \_\_\_\_\_

**NOTE: A Boy Scouts of America (BSA) Medical Form for each Cub Scout must be on file for this activity.**