

**BOY SCOUTS OF AMERICA
TROOP 805**

Activity Information Form

**K1 Go Karting & Traffic Safety Merit Badge
Saturday, December 2nd, 2017**

What: **In Cub Scouts, we raced pinewood derby cars. Now, Troop 805 is racing motorized karts!!!**

We will start the day at 9am at K1 Go Karting with a merit badge class on Traffic Safety, offered by the California Highway Patrol's Officer Hahn. He will review all of the elements required to complete the Traffic Safety Merit Badge and will sign off at the end on blue cards for Scouts who participate. *Note that some prep work (homework) will be required and this will be handed out on or before November 21st to each Scout submitting their permission slip.*

Then, Troop 805 has rented out the new K1 Go Kart racing track for each Scout to race in 3 races in high performance go karts. This will be a fun opportunity to learn about traffic safety and then race as swiftly as you can manage those turns. Come join us.

When: Saturday, Dec 2nd @ 9:00 – 10:15am **Traffic Safety MB - CHP's Officer Hahn (optional)**
Saturday, Dec 2nd @ 10:15am – 12:30pm **Go Kart Racing - Troop 805 on track!**

Where: K1 Speed Go Kart Track, 6400 Sierra Ct Suite B, Dublin, CA 94568
Phone: (925) 230-9502

Cost: \$65 includes full merit badge fee and 3 go kart races on the track for each attendee.

Uniform: Class B

Drop/Pickup: Scouts should be dropped off at K1 Speed and are to be picked up there as well.

Other Details: Please sign the attached waiver, as that will be required for all Scouts to be able to race.
You must be at least 48 inches tall to participate.
You must wear closed toe shoes (no sandals).
Food will not be served at this event. Please eat a big breakfast before you arrive.

We currently have 36 slots reserved, so please turn in your permission slip early!

Questions: John Marshall -- johnmarshall1970@gmail.com or 925-200-3715

Return the permission slips and checks to your Patrol Leader.

*Patrol Leaders submit the collected slips, money to the outing folder no later than the Troop Meeting on
Tuesday, Nov. 21st @ Troop Meeting*

➔➔➔ K1 Go Karting & Traffic Safety Merit Badge – Dec 2, 2017 ←←←

BOY SCOUTS OF AMERICA - TROOP 805
INFORMED CONSENT, RELEASE AND PERMISSION TO PARTICIPATE

K1 Go Karting & Traffic Safety Merit Badge, Saturday, December 2nd, 2017

I hereby give permission for my son, _____, to attend this outing with Boy Scout Troop 805. I understand that participation in Scouting activities involves a certain degree of risk and can be physically, mentally, and emotionally demanding. I have carefully considered the risk involved and have given consent for myself or my child to participate in this activity. I also understand that participation in this activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators, and all employees, volunteers, participants, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

If this activity involves archery or firearms, I hereby give express consent for a qualified range instructor to furnish BSA-approved archery or firearm equipment to the participant for the purpose of instruction in the safe handling and use of such equipment and related activities at designated ranges.

I hereby give permission for the adult leaders to give over-the-counter (OTC) medicines as needed (e.g. Aleve for headache, fever, inflammation, pain; Benadryl for allergic reactions, nasal allergies, hives and itching; Lomotil for diarrhea; etc.) In case of emergency involving my child, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities. (All reasonable measures will be taken to safeguard the health and safety of the Troop's members.)

Name of Parent or Guardian (please print): _____

Signature: _____ **Date:** _____

Home Phone: _____ **Cell Phone:** _____

If I cannot be reached in the event of an emergency, please notify the person named below:

Name: _____ **Cell Phone:** _____

The following information relates to my son: **Height:** _____ inches (must be at least 48 inches tall)

Physician's Name: _____ **Phone:** _____

Insurance Company: _____ **Policy No:** _____

Allergies or pertinent medical information (incl. Rx & OTC meds): _____

Tour Plan Information

Drive? (Check if Yes)	Vehicle Year / Make / Model	No. of Passengers	Driver's License / Name / Cell Phone	Auto Insurance (Min.: \$50K/\$100K/\$50K)
<input type="checkbox"/> To:				
<input type="checkbox"/> From:				

(Reminder: Parents are requested to provide Troop transportation on at least two outings per year.)

Registered Adults: Will you be participating with the troop? Yes: <input type="checkbox"/> Name: _____
Youth Protection Trained? Yes: <input type="checkbox"/> YP expiration date: _____