## 2018 LOBO ADVENTURES REGISTRATION FORM

Name of Scout:	Age:	Troop:
Campsite:	Rank:	
As a member of LOBO you can register for up to three Merit I of merit badges reserved for Scouts 14 and older.	Badges during the	e morning. The following is a list
If you are interested in taking an offered merit badge that is no in your selection next to "Other."	ot listed below du	ring the morning sessions, write
Please place an X next to the merit badge you would like to ta	ke:	
9:00 Chemistry Motorboating Other (Write your choice)		
10:00 First Aid (runs from 10-12, do not select a Geocaching Motorboating Shotgun Shooting (runs from 10-12, do not select a Other (Write your choice)		
11:00 Chemistry Other (Write your choice)		
Or <b>COPE 9:00-12:00</b> , Monday-Friday		
Parents, please read and sign the portion below.		
I understand that participation in the LOBO Adventures prograbike touring, tubing on the Farmington River, etc. and that the could result in injury or death. I understand these risks and alsensure the safety and well being of my son/daughter and I hav these LOBO activities during his/her stay at Camp Sequassen.	se activities invo o understand that e given permission	lve a certain degree of risk that precautions will be taken to
I understand some of these activities are done off the camp proto transport my son/daughter off camp to these event sites so leaves to the second sites are done off the camp protocol transport my son/daughter off camp to these event sites so leaves to the second sites are done of the camp protocol transport my son/daughter off camp to these event sites so leaves to the second sites are done of the camp protocol transport my son/daughter off camp to these event sites so leaves to the second sites are done of the camp protocol transport my son/daughter off camp to the second sites are done of the second sites ar		
In the event of an emergency, I understand every effort will be reached, I give my permission to the physician selected by the including hospitalization, anesthesia, surgery, or injections of release of medical information pertaining to treatment/condition leader in charge.	adult leader in cl medications for r	harge to secure proper treatment, ny child. I further agree to the
Signature of Parent/Guardian	Date	2

Parents should also sign the waiver for Tubing on the Farmington River and submit with this LOBO form.