



# Potawatomi Council

## First Aid Meet

Sussex Hamilton HS  
W220 N6151 Town Line Rd

### Saturday March 2<sup>nd</sup>, 2019



**Activities:**

Patrol Competitive First Aid Meet

**Plan:**

All Indian Mound attendees will participate in the meet arriving at 8:30 am and returning to IMR at noon

You can also attend the meet if unable to attend IMR

Parents are always welcome!  
Leadership - Terry Hoepner

**Note:**

Class "B" uniform  
Blanket

**Don't Bring:**

- Cell Phones (youth)
- Sheath Knives



**Fees:**

Included in camping fee  
\$5.00 meet only  
\$10.00 after 2/12/19

**Emergency Numbers**

Diane Peterson 262-993-4136  
Terry Hoepner 262-309-8497

**Travel Plans:**

Troop traveling from camp  
Others meet at Hamilton HS  
W220 N6151 Town Line Rd

Return permission slip by  
Tuesday, Feb 12<sup>th</sup>, 2019

Potawatomi County Council - Troop 16

Boy Scouts of America

I hereby grant permission for my son, \_\_\_\_\_ to go to the Potawatomi Council First Aid Meet, under the leadership of Terry Hoepner. Meet begins on March 2<sup>nd</sup> 2019 at 8:30 am at Hamilton High School ending at 12:00 pm.

- |  |   |
|--|---|
| <input type="checkbox"/> Father/Mother will go           | <input type="checkbox"/> We can transport _____ persons including driver      |
| <input type="checkbox"/> Father/Mother will not go       | <input type="checkbox"/> Any condition now requiring medication or treatment: |
| <input type="checkbox"/> Father or Mother can drive out  | _____   |
| <input type="checkbox"/> Father or Mother can drive back |   |

During this time, I may be reached at:

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Address City Phone

In the event I cannot be reached and emergency medical treatment is required, you may contact:

( ) \_\_\_\_\_ OR  
Name Phone

( ) You may authorize medical authorities to prescribe such Treatment.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Signed \_\_\_\_\_

Return permission slip by Tuesday, Feb 12<sup>th</sup>, 2019