



# 5<sup>th</sup> AURORA CUBS

## Parent/Guardian Consent Form

**Event:** Winter Survival Camp  
**Date:** Friday, February 27, 2015 – Sunday, March 1, 2015  
**Time:** 8:00 p.m. Friday to 12:00 p.m. Sunday  
**Place:** Woodland Trails, Aurora – Maplewood Lodge  
**Cost:** \$50.00 per person

Come and learn to survive a tragic accident. You will not be voted off the island! We will learn compass and star work, first aid, erect a shelter using the knots we have learned and cook a meal. We will be sleeping in a cabin but will spend most of the day outdoors. Space is limited as there are only 30 beds in the lodge. Please bring a toboggan or sled. Parents are welcome to participate but may not be able to sleep over.



Youth's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

**Permission to Participate:**

I the undersigned, after having read, understood and completed the information, hereby give my permission for my child to attend and participate in: Winter Camp at Woodland Trails on February 27<sup>th</sup>, 2015 to March 1<sup>st</sup>, 2015. **I have reviewed the information on my child's/ward's physical fitness form and confirm that the information is up to date.**

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date