## CIVIL AIR PATROL CADET ACTIVITY PERMISSION SLIP

## SUGGESTED BEST PRACTICE for LOCAL "WEEKEND" ACTIVITIES:

Announce the activity at least 2 weeks in advance and require participating cadets to sign-up via this form 1 week prior to the event

1. INFORMATION on the PARTICIPATING CADET				
Cadet Name:	Cadet Grade:		CAPID:	
Unit Charter Number:	Activity Name:		Activity Date:	
	-			
2. INFORMATION about the ACTIVITY				
For hotel-based activity or conference Grade & Name of Supervising Senior:		For hotel-based activity or conference Supervising Senior initial to acknowledge responsibility:		
3. PARENT'S or GUARDIAN'S CONTACT INFORMATION				
Parent or Guardian Name:	Relationship to Cadet:		Contact Number on Date(s) of Activity:	
4. OTHER DOCUMENTS REQUIRED to PARTICIPATE  Check those that apply and attach with this form				
☐ CAPF 31 Application for Special Activity ☐ Other / Special Local Form		(specify)		
☐ CAPF 160 CAP Member Health History Form				
□ CAPF 163 Provision of Over the Counter Medication				
5. PARENT's or GUARDIAN's AUTHORIZATION Cadets who have reached the age of majority, write "N.A."				
I authorize my cadet to participate in the activity described above.	Signature:		Date:	
Disposition: Units may discard this completed form when the activity concludes.				
Please detach on the dotted line. The upper portion is for CAP and the lower portion is for the parent's or guardian's reference.				
6. HELPFUL INFORMATION for PARENTS & GUARDIANS To be completed by the cadet with assistance from local leaders or activity hosts				
Activity Name:		Activity Date & Time	Activity Date & Time:	
Activity Location:		Activity □ classroom, tour, light □ backcountry		
Participation Fee:	Payment Due:	duty <b>Format(s):</b> $\Box$ rigorous	physically	
Transportation Provided? ☐ Yes ☐ No Extra Fee:		Transportation Rally	Transportation Rally Point:	
"High Adventure"? ☐ Yes ☐ No If yes, explain:		CAP Point of Contact	CAP Point of Contact Name:	
		The supervising adult staff is expected to include  ☐ men only ☐ women only ☐ men and women		
Meals: ☐ Provided ☐ Bring own food ☐ Bring money		Emergency Phone:		
Equipment Needed:   See website or flier for equipment list		Activity Website:	Activity Website:	
		Estimated Time Retu	Estimated Time Returning to Home or Rally Point:	