

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: NER-NJ-073	Activity Name: West Essex Memorial Day Parade	Activity Date: 30 May 2016

2. INFORMATION about the ACTIVITY

<i>For hotel-based activity or conference</i> Grade & Name of Supervising Senior:	<i>For hotel-based activity or conference</i> Supervising Senior initial to acknowledge responsibility:
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3. PARENT's or GUARDIAN's CONTACT INFORMATION

Parent or Guardian Name:	Relationship to Cadet:	Contact Number on Date(s) of Activity:
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4. OTHER DOCUMENTS REQUIRED to PARTICIPATE

Check those that apply and attach with this form

<input type="checkbox"/> CAPF 31 Application for Special Activity	<input checked="" type="checkbox"/> Other / Special Local Forms (specify)
<input type="checkbox"/> CAPF 160 CAP Member Health History Form	CAPF161 Emergency Information (keep it in your right pocket)
<input type="checkbox"/> 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:
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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: West Essex Memorial Day Parade with American Legion	Activity Date & Time: 30 May 2016 0830 to approx 1130
Activity Location: Bloomfield Ave, Caldwell	Activity <input type="checkbox"/> classroom, tour, light <input type="checkbox"/> backcountry duty Format(s): <input checked="" type="checkbox"/> physically rigorous <input type="checkbox"/> flying
Participation Fee: None. Payment Due: n/a	Transportation Rally Point: 303 Bloomfield Ave, Caldwell
Transportation Provided? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Extra Fee:	CAP Point of Contact Name: Stan Rogacki, Major, CAP
"High Adventure"? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, explain:	<i>The supervising adult staff is expected to include</i> <input type="checkbox"/> men only <input type="checkbox"/> women only <input checked="" type="checkbox"/> men and women
Meals: <input type="checkbox"/> Provided <input checked="" type="checkbox"/> Bring own food <input type="checkbox"/> Bring money	Emergency Phone: 973-715-0033
Equipment Needed: <input type="checkbox"/> See website or flier for equipment list UOD: BDUs; Hydration pack or water bottle. Drop off at American Legion, 303 Bloomfield Ave, Caldwell at 0830. Pick up: Caldwell Library, 30 Clinton Road West Caldwell at end of parade approx 1130	Activity Website: Estimated Time Returning to Home or Rally Point: Approx 1130 Caldwell Library, 30 Clinton Raod, Caldwell.