

Wednesday Supper Club, Paulist Center, Boston
5 Park Street, Boston
Wednesday, March 10
4:30 pm – 8:45 pm

The Event: Service minded scouts will be heading to downtown Boston to the Wednesday Night Supper Club, one of the many soup kitchens in Boston, to serve a tasty meal to those in need. Often, in these trying economic times, many families are relying on soup kitchens and food pantries to supply their basic food needs. Scouts will be acting as waiters, bringing food to tables, busing tables, and filling water glasses for the supper guests. More information about the Supper Club and the jobs we will be doing can be found at: http://www.paulistboston.com/release_details.asp?id=59.

Schedule: Scouts will meet at Hancock Church parking lot at 4:30pm on Wednesday, March 10, and return to Lexington at about 8:45pm, after the auditorium is cleaned up. Scouts will be dropped off at home.

What to Bring: Scouts and adult volunteers should wear Troop 119 T-shirts.

Adult Coverage: Yes, we will need a few adult volunteers to drive and chaperone.

Contact: Contact Jan Gunther by phone at 781-652-0420 or email **jan “at” gunther “dot” com**.

Troop 119 Medical Waiver & Permission Slip – Wednesday Night Supper Club, 3/10/10

** Please complete ALL information below **

_____ has my permission to participate in the trip to the soup kitchen at the Paulist Center in Boston. I give permission to the leaders of Troop 119 to render First Aid to the above named person, should the need arise. In the event of an emergency, I also give permission to the physician, selected by the adult leader in charge, to hospitalize, secure proper anesthesia, order injection, or secure other medical treatment, as needed. I further agree to hold the above named unit and its leaders blameless for any accidents that might occur during this outing, except for clear acts of negligence. I understand that there may be significant time spent with significant physical exertion during this event.

Parent or Guardian's signature

Date

Please print name

Please list any health restrictions or allergies below:

During the event, I can be contacted at (please list all numbers):

If I can not be contacted, please contact (name and numbers):

Name:

Cell Phone:

Comments:

I am willing to chaperone. _____

I am willing to drive. _____