

# Authorization Form For a Cadet Weekend Activity

## 354 RCSCC INVINCIBLE

Exercise: Operation Salty Sailor - Last one this training year

Place: Jerichio Beach Sail Centre (Days Only, NOT over Night)

From: (Time) 0700 (7:00 AM) on Saturday the 11th Day of May

To: (Time) 1700 (5:00 PM) on Sunday the 12th Day of May

I, the undersigned parent/guardian of:

**Rank:** \_\_\_\_\_ **Name:** \_\_\_\_\_

I Hereby grant permission for my son/daughter/ward to attend the exercise as noted above.

The departure time is stated above and the cadet will not be permitted to leave prior to that time unless prior approval is given.

I further grant permission for any emergency medical or dental treatment deemed necessary by the conducting officer(s).

Telephone number(s) where I may be contacted in case of an emergency during this exercise:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Amount Of Donation**

\$ \_\_\_\_\_  
Cheque / Cash

Parent  
Or  
Guardian

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name - Please Print)

Turn This Portion in

Keep This Portion

**NOTE:** If this form is not completed and returned to the Ships Office by Wednesday  
May 1<sup>st</sup> attendance **will not** be granted. (Space is Limited to 24 , not all cadets can go)

Drop Off Time 0700 Safeway Parking lot 203 Pick Up Time 1700 Safeway Parking lot 203

R. J. Juliusson  
Lieutenant (N)  
Commanding Officer

Weekend Emergency Contact Person **Lt (N) R. J. Juliusson**  
Weekend Emergency Contact # **604-219-8049**