



Cookie Booth Authorization

Dates: Friday, Feb. 7-Sunday, March 8, 2020

Entered:
Scanned:
eBuddy Ready:
Website Ready:

Girl Scout volunteer information:

Service unit name: Point Loma 619
Volunteer name: Judie Clayton

Phone: 415 823 9275
Email: Judiein5f@gmail.com

Store contact information:

Manager/business owner's name: OB Noodle House

Store name: _____
Address: ~~4993~~ 4993 Niagara
City/Zip code: SD CA 92106

Phone: 619 255 9858
Email: _____

Cookie Booth Shifts:

All days and times approved (Feb. 7-March 8; 8 a.m.-8 p.m.)

-Or- choose approved days and times:

- | | | | | |
|---|--|--|--|---|
| <u>Approved days:</u> | | <u>Approved shifts:</u> | <u>2hr shifts</u> | <u>3hr shifts</u> |
| <input checked="" type="checkbox"/> Monday | <input checked="" type="checkbox"/> Friday | <input type="checkbox"/> Afternoons only | <input type="checkbox"/> 8-10 a.m. | <input checked="" type="checkbox"/> 9-11 a.m. |
| <input checked="" type="checkbox"/> Tuesday | <input checked="" type="checkbox"/> Saturday | <input type="checkbox"/> Mornings only | <input type="checkbox"/> 10-Noon | <input type="checkbox"/> 8-11 a.m. |
| <input checked="" type="checkbox"/> Wednesday | <input checked="" type="checkbox"/> Sunday | <input type="checkbox"/> All Day | <input type="checkbox"/> Noon-2 p.m. | <input type="checkbox"/> 11-2 p.m. |
| <input checked="" type="checkbox"/> Thursday | | | <input type="checkbox"/> 2-4 p.m. | <input type="checkbox"/> 2-5 p.m. |
| | | | <input checked="" type="checkbox"/> 4-6 p.m. | <input type="checkbox"/> 5-8 p.m. |
| | | | <input checked="" type="checkbox"/> 6-8 p.m. | |

Other shifts not listed: Weekends 10-7

I confirm that the location is open during these times.

Property management:

Does Property Management company need to provide additional approval? No Yes

Company: _____

Contact: _____ Phone/email: _____

Insurance:

Girl Scouts San Diego will issue a certificate of liability insurance for your location. Please indicate necessary verbiage, if any: _____

Special requests:

Girl Scouts will be the only soliciting organization during these times: No Yes

Are there any known security concerns? Please specify: _____

Set-up instructions, check all that apply:

- Outside only Inside okay Ask manager for set-up instructions One door only Both doors okay Pop-ups okay

Manager/owner's signature: [Signature] Date: 1/7/2020

Return this form to:

Girl Scouts San Diego, Attn: Product Program
Address: 1231 Upas Street, San Diego, CA 92103
Fax: 619-481-3504 Phone: 619-610-0825 Email: cookies@sdgirlscouts.org

Council-white copy
Service unit-yellow copy
Business-pink copy
MG:mg PSC-002 7/19/2019

