



TROOP/GROUP PROGRAM EVENT REGISTRATION

INSTRUCTIONS

- Be sure to read event registration details before registering. Please print clearly with blue/black ink or type. Forms cannot be transferred from one event to the next.
- **Incomplete registration forms will not be processed.** One registration form must be completed for each event.
- Full payment must accompany registration form unless deposit option listed in event details.
- Pre-registration is necessary to ensure adequate materials are available. **No refunds** will be granted unless event is cancelled. Add-on's after event registration deadline will be made if space is available.
- Registration for all events will close on date listed in event details, or sooner if event fills before registration deadline.
- Only girls currently in grade listed in event details may attend event.

TROOP INFO

Troop/Group# Troop Age-level D B J C S A

Adult Contact Name Middle Last

(Leader or Adult in Charge at event)

Mailing Address Apartment Number

City State Zip Code

(.....) (.....)

Day Phone Cell Phone/Pager

E-mail Address Yes, I will help Council use resources wisely and receive my confirmation via e-mail

EVENT

Event Name..... Date..... Time(s).....

FEES	Participants #Attending	x Fee/person	= Total fee
Girls	= \$.....
Adults	= \$.....
TOTAL	= \$.....

TOTAL FEE
(unless deposit option listed in details)

\$.....

AID

Financial Assistance: Total Cost \$..... Family Contribution \$..... Troop/Group Contribution \$.....

TOTAL FINANCIAL ASSISTANCE REQUESTED \$.....

Please note it takes several weeks for the committee to review requests for financial assistance. Please submit several weeks prior to event.

PARTICIPANT LIST

List all event participants; include all information requested. If additional space is required, attach your own list. Incomplete registration forms will not be processed.

NAME	GRADE	G/A	PHOTO PERMISSION Y/N	PHONE	Accommodations needed, if any (accessibility, medical, dietary, interpreter, etc.)
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AGREEMENT

In utilizing this form, you are agreeing to comply with all event registration procedures, and certify that all girls and adults participating in the event listed above are registered members of Girl Scouts of the USA. The troop leader/Adult in Charge at the event is responsible for permission slips, health histories, and emergency contact information, for each participant attending the event, and understands no girl will be allowed to stay without this information.

Signature of Leader/Adult in Charge Date

OVERNIGHT EVENT: Activity consultant approval needed for any council-sponsored overnight activity.

Signature of activity consultant Date

PAYMENT INFO

\$ Cash Name on Credit Card

\$ Check (payable to Girl Scouts)

\$ Council/Cookie Bucks Credit Card # Expiration Date (MM/YY).....

\$ Financial Aid

\$ Credit Card
VISA, MasterCard, Discover, AmEx

Signature
Your signature above signifies your agreement to allow Girl Scouts San Diego to charge the above amount to your credit card. You agree to pay this amount pursuant to the agreement you have with your credit card provider.

SUBMIT

<p>FAX 619-795-6930</p> <ul style="list-style-type: none"> • Must pay with Credit Card • GSSD cannot confirm receipt of FAX • Do not mail original form once fax is sent 	<p>DELIVER/DROP-OFF</p> <p>GSSD Headquarters office 1231 Upas Street, San Diego, CA 92103</p>	<p>MAIL</p> <p>Girl Scouts San Diego Program Registration 1231 Upas Street, San Diego, CA 92103</p> <ul style="list-style-type: none"> • Consider using priority mail to ensure timely receipt. • Allow up to 10 days for delivery recommended
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