



Event Approval Checklist

For events or series with more than 50 participants
or when planning or risk management is complex

This tool is designed to assist in event planning, and to request approval. See *Directing Girl Scout Events and Series Self Study Guide* for guidance.

To propose an event or series, complete Section 1 and submit to the Service Unit team. The team will let you know if it's okay to continue planning. Your council representative may also approve proposals.

Complete Section 2 for final approval prior to the event, at least 30 days prior to event. A Safety Management Plan should accompany this form at that time. Your Activity Consultant can help.

Once the event is over, report back to the service unit by completing Section 3 within 30 days.

Section 1 (proposal):

Title of Event or Series _____ Date _____

Purpose of Event _____

Time (start) _____ (end) _____ Location (site name & address) _____

If on council property, have you made your reservation? Yes No

If off council property, is the site's certificate of liability insurance on file? Yes No

Target participants: Daisy Brownie Junior Cadette Senior Ambassador
 Families Girl Scout Recruits Adult-only

Expected # (girls) _____ (adults) _____ Maximum participants for site _____

Proposed Fee _____ Estimated Income _____ Estimated expenses _____

(use the Event Budget Worksheet to estimate income and expenses and for fee guidelines)

If this is a money-earning project, has an application been submitted? Yes (attach copy) No

Event Director name _____

Mailing address _____ City _____ Zip _____

Phone # (day) (____) _____ (evening) (____) _____

E-mail _____

Event Director Training Completion Date _____ Service Unit _____

How will girl planning be incorporated?

Describe any other information the team may need to understand the event (attach details if desired)

Income and expenses – attach the first page of the Event Budget Worksheet with your estimates.

For SU Team/staff use only: Date proposal received _____ Response date _____

Proposal approved? Yes No With adjustments: _____

Final approval due date (30 days prior to event is typical) _____

Reviewed by _____ Comments: _____

Section 2 (final approval of developed plans):

During your planning, have any of the answers from Section 1 changed? If so, please describe what's different:

Will girls earn any badge components or Journey awards during this event? Yes No
If so, please describe _____

Safety and Risk Management Recap (attach a copy of your Safety Management Plan)

- Reviewed *Volunteer Essentials Chapter 4: Safety-Wise* and assure relevant standards will be upheld
- Reviewed the *Safety Activity Checkpoints* and assure they will be covered
- Expectations for girl readiness and skill level have been determined and communicated
- Arrangements made for any specialized equipment
- Additional insurance purchased (if necessary)
- Program leaders have the necessary training/ experience/ certification
- Program leaders (including non-Girl Scout adults) have clearly defined expectations as to their responsibilities, arrival and departure time, supplies and equipment, clean-up procedures, etc.

- Site visit completed and deemed safe and appropriate for Girl Scouts
- Site hazards identified and a clear safety management plan will be shared with all participants
- Adequate restrooms and available drinking water have been identified
- Location of nearest emergency medical treatment facility and directions have been identified
- Plans developed for missing person, unfamiliar person or other potential crisis situation
- Evacuation plan established in case of fire or natural disaster, and will share information with participants

- Participants will be informed well in advance regarding any preparation, skills, equipment, clothing, etc., needed for the event

Event First Aider Information

Each troop responsible for their own first aid _____ Yes _____ No

Event First Aider Name _____ Phone (____) _____

Type of Certification _____ Exp. Date _____

- Level I Level II (for events of 200 or more participants or remote location)

Signatures

Activity Consultant (Safety Management Plan reviewed)

Money-Earning Project Approval (if applicable; SUM, or Council Rep. if earnings over \$250)

Service Unit Team or Program Approval (Program quality and necessity evaluated)