

# **Troop Travel Resource Packet**

**Updated 9/19**

# GLOSSARY

Evaluate readiness.....	3
Sleeping arrangements.....	4
Travel progression.....	5
Creating a plan.....	6
Girl planning.....	7
GSUSA travel chart.....	8
Planning sheet.....	9
Sample planning timeline.....	10
Sample meeting planning schedule.....	11
Checklist.....	12
Girl packing list.....	13
Chaperones.....	14
Keeping girls safe.....	15
Transporting girls.....	15
Inclusion.....	16
Emergency Procedures.....	17
Guidelines for trips.....	18
Plan 2 insurance form.....	19
Plan 3 insurance form.....	20
Rent/lease vehicle form.....	21
Girl/Adult health history form.....	22
Individual trip permission form.....	24
Year permission form.....	25
Council cares instructions.....	27
Council cares forms.....	28
Injury and incident form.....	30



## GSCSNJ Troop Travel and Transportation

This supplement includes tips and tools to support you. Use this resource in conjunction with Volunteer Essentials as well as any applicable Safety Activity Checkpoints. You are responsible for using current materials and standards.

For any overnights or travel, a troop must be in good standing:

- At least one attending leader has New Leader Training.
- All persons attending are current registered members; adults have current background checks

It is recommended leaders review the appropriate additional training materials for their girls' program level.

Share this information with your group, girls, and parents. Touch base with your Service Unit when you need advice. Reach out to staff at Council when you need help. Most of all, enjoy the process of working with your girls to plan great trips!

## Evaluating Readiness

### Girls

As you begin to plan trips, from the simplest to the most complex, ask yourself what the girls are ready for. Build necessary skills and give girls opportunities to practice.

For any kind of trip, girls need practice in some basic life skills as well as specific travel-related skills. Give them a chance to experience progressive trips before taking an advanced trip. Girls need to be able to adjust to differences in culture, noise, language, money, temperature, etc. as they get farther from home. The longer a trip, the more girls will need endurance, independence, ability to manage gear, and the ability to stay patient with each other. What are some skills girls should learn and practice as they progress through the levels of trip taking?

- Being away from home, her routine and familiar surroundings for longer and longer periods
- Taking care of herself
- Organizing and keeping track of her own belongings
- Good safety practices
- Good manners



- Able to get along with others for longer and longer periods – accepting responsibility for their own behavior
- Comfortable with a hotel
- Budgeting and fiscal responsibility
- Able to handle emotions
- Planning and evaluationg
- Making choices and group decisions

Girl Scout Juniors and above should be actively engaged partners in determining where, when and how they travel or participate in activities.

## Adults

Adult readiness is a factor when it comes to troop travel. To make complicated plans and raise funds, the troop will need parental support and ‘buy-in’. Parents need to have clear communication through the planning and travel process. Be sure to communciate the mission and vision of the trip, how money will be managed, specific transportation, safety, and sleeping plans.

If a parent doesn’t have confidence in their daughter’s ability to be independent, it can be very difficult to ‘let go’. Be sure to provide progressive experiences that allow girls to develop skills in a safe setting – and then share those successes with families.

If you notice that several parents are feeling uncomfortable with the idea, this may be a sign that you are attempting a plan that is a bit too ambitious. Review the progression so far, and talk to your parents about the steps taken and what steps will help them be more comfortable.

## Sleeping Arrangements

If girls are sleeping in separate tents or rooms, there should never be 1 adult female chaperone in same sleeping space with girls. It is ok to just have the girls in this sleeping area, or to have two adult female chaperones in any space the girls are sleeping. If any of your chaperones are male they must sleep in a separate space away from the group, including his/their own daughter(s).

## Let’s get going!



## Travel Progression in Girl Scouting

**Field Trip:** also called a day trip. Start with 1-2 hours and may go as long as all day. Daisies and older.

Girls:

- Use the buddy system
- Learn something new
- Use basic planning skills and decision-making
- Able to listen, and follow rules
- Appropriate public behavior

**Overnights:** 2 or less nights in a lodge, cabin, hotel, museum. Start with 1 night close by, then move farther and farther away. Daisies and older, depending on activities planned and trip length.

Girls:

- Use the buddy system
- Develop independence
- Added complexity of skills and planning experience
- Wider options due to distance possible
- Able to spend overnight away from home
- Can take of their daily routine (comb hair, brush teeth, dress themselves, etc)
- Can pack, carry and keep track of own gear
- Has endurance for longer days
- Understands what to do if separated from group

**3 Nights or more:** Juniors and older.

Girls:

- Experience of a big adventure
- Experience new pace or vibe
- See significant sites
- Possible new culture
- Try new forms of transportation
- Get off the beaten track
- Polite behavior on public transportation
- Ability to handle own money
- Flexibility (things will change)
- Able to spend extended periods in a vehicle for travel





**International Travel:** 3 or more nights away, outside the Country using air travel.  
Cadettes and older.

Girls:

- Potential for life-changing experiences
- Once in a life time opportunity to travel abroad with the troop
- Practice foreign language
- Experience a different economy
- Open girls' eyes to the world!
- Cultural and economic sensitivity
- Able to maintain personal safety
- Able to safeguard money, valuables, and documents
- Able to navigate complicated travel arrangements
- Physical and emotional endurance for long trips

## **Everybody loves PIE (Plan, Implement, Evaluate)**

### **Plan, what plan?**

As leaders we empower the girls to plan their own adventures. You are there to guide them. Brainstorm ideas with the girls.

What do they want to include on the overnight?

Is there a theme?

What will we do? Journey activities? Take Action project?

Where shall we go?

What gear do we need? Shall we buy it? Borrow it?

Have the girls develop the Ground Rules with you.

If they create them, they own them and are more likely to follow them.

Discuss quiet time, lights out, wake up time **before** the trip

Discuss the new experiences they may have:

Strange surroundings

Sharing space with another group

Review health and safety procedures – **Check Safety Activity Checkpoints!!!!**

Fire drill

Meeting place

What to do if separated from the group

Plan simple meals everyone can eat

Have a backup plan

Include some free time!

Create a Kaper Chart

Hold a Family Meeting before the trip

Explain the ground rules for the trip, set limits, agree on consequences.



**Implement** – Have a great time!

## **Evaluate**

What went well?

What could have been better?

Shall we do this again? At this place? This time of year?

Should we go somewhere else?

## **Planning Progression**

### **What can the girls do?**

Daisy Girl Scouts **can help plan snacks, help with trip ideas...**

Brownie Girl Scouts can help plan snacks, help with trip ideas, ***what to pack, where to go, when to go, what to eat, help with shopping...***

Junior Girl Scouts can help plan snacks, help with trip ideas, ***what to pack, where to go, when to go, what to eat, help with shopping, do the shopping, decide on sleeping arrangements, decide how long the trip will be, work out a kaper chart, research trip ideas and gather information, surf the net for information...***

Older Girl Scouts can help plan snacks, help with trip ideas, what to pack, where to go, when to go, what to eat, help with shopping, do the shopping, decide on sleeping arrangements, decide how long the trip will be, work out a kaper chart, research trip ideas and gather information, surf the net for information, ***plan the budget, make phone calls, fill out paperwork, plan overnights for others...***

## **Let's get going!**



# Girl Scout Travel Progression

Progression allows girls to learn the skills they need to become competent travelers, including how to plan and organize trips. Because when girls take the lead, the possibilities are endless.

## LOCAL FIELD TRIPS

Get your travel feet wet! Walk to a nearby garden, or take a short ride to a firehouse or other local spot.

Keep it girl-led: girls choose the location.

## DAY TRIPS

Take an all-day trip!

Keep it girl-led: girls choose the location and activity (perhaps working toward a badge) and make plans for lunch.

## OVERNIGHTS

Start with one night, maybe at a camp or museum. Progress to a weekend trip in a nearby city or state park.

Keep it girl-led: girls plan the activity and meals, create travel games, and pack their own overnight bags.

## REGIONAL TRIPS

Spend three to four nights away somewhere a few hours from home.

Keep it girl-led: girls plan key details of the trip, such as the activities, the budget, the route, and lodging.

(Extended trip insurance required.)

## NATIONAL TRIPS

Travel the country! Trips often last a week or more. Girls should think beyond a typical vacation location and consider historical sites, museums, or national parks!

Keep it girl-led: girls lead the entire planning process and might add a community service or Take Action project.

(Extended trip insurance required.)

## INTERNATIONAL TRIPS

Travel the world! These life-changing trips usually take one to three years to prepare. Consider visiting a WAGGGS World Centre!

Keep it girl-led: girls download the Global Travel Toolkit and plan their entire trip (including learning about the language, culture, passports and visas, exchange rates, etc.).

(Extended trip insurance required.)

## INDEPENDENT TRAVEL

Older girls with national or international travel experience can travel nationally or internationally independently through council-offered travel opportunities or GSUSA's Destinations program. Check with your council, or visit the Girl Scout Destinations website!

Check with your council about age requirements. Girls should have experience at every level of the progression before moving on to the next level. For regional travel, girls must be Juniors or older. For national and international trips, girls must be Cadettes or older.

**When moving up to each level of the progression, consider girls' independence, flexibility, decision-making skills, group skills, and cross-cultural skills.**

## Leaders

Traveling with Girl Scouts is unique because girls take the lead—during the planning *and* on the trip. This builds their skills, develops their confidence, and teaches them how to overcome challenges and practice collaboration. Girls are most likely to achieve these outcomes when they travel with the recommended girl/adult ratios (without too many adults on the trip.) Consider starting your travel experience by inviting parents/guardians to join local field trips and day trips. By the time girls are ready for a weekend trip—and definitely when it comes time for a regional or national trip—they should be ready to do the planning and make decisions. When too many adults participate, trips become less girl-led. Avoid having an excess of parents join your regional, national, and international trips. When girls have the chance to travel independently (with their troop leaders, of course!), there's no limit to what they can learn about themselves and achieve.



This is a sample of a check list you can use with your girls. It will help them learn what needs to be done in order to plan.

## TRIP PLANNING SHEET

Kind of trip \_\_\_\_\_

Dates \_\_\_\_\_

Trip coordinator \_\_\_\_\_

Phone \_\_\_\_\_

Where we are going:

Place \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Adults in charge \_\_\_\_\_

Phone \_\_\_\_\_

Transportation:

Driver(s)	Number of vehicle passengers
-----------	------------------------------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

Who is going? Their Job Check list

Transportation \_\_\_\_\_

Food \_\_\_\_\_

Reservations \_\_\_\_\_

Equipment \_\_\_\_\_

Route \_\_\_\_\_

Guests \_\_\_\_\_

Forms \_\_\_\_\_

Entertainment \_\_\_\_\_

**CONGRATULATIONS!!**

You and your girls have planned a trip

**HAVE FUN!!**



# Sample Timeline for Planning an Overnight Trip

## Up to 6 months before the event

- Select the place and date
- Read relevant sections in Volunteer Essentials and Safety Activity Checkpoints
- Get an idea as to how many girls and adults will be participating
- Arrange transportation
- Reserve (or arrange to borrow) necessary equipment
- Decide on program activities

## 6 Weeks before the event

- Confirm which girls and adults will be participating
- Collect money from the girls and adults who will be participating
- Send trip notification to Service Unit Manager or designated service team member
- Send in registration form and fees
- Determine an emergency plan with the girls
- Plan activities and practice needed skills at meetings

## 1 Week before the event

- Give a copy of roster of emergency phone numbers to the emergency contact person
- Gather supplies and food (if necessary)
- Arrange carpool(s) as necessary

## 1 Day before the event

- Pack your personal gear and any group equipment at your home

## Day of the event

- Provide each driver with complete sets of health and permission forms
- Help girls pack gear in car(s)
- Do your best to leave On Time!
- Go and Have a Really Good Time!

**Let's get going!**



## Sample of meeting schedule to plan trip with girls

	Meeting Content	Leader Activities
<b>Meeting 1</b>	Discuss overnight with group Decide – where, what to do, what activities interest the girls Discuss – what to wear, bring, pack, dressing in layers Do – practice skills	Make reservations if necessary Read and discuss issues in Safety Activity Checkpoints Send home permission slips Notify SU of trip
<b>Meeting 2</b>	Consider everyone when planning menus – create shopping lists Set the budget Continue practicing skills	Inform families about the upcoming trip Solicit volunteers – shoppers, drivers, emergency contact person, etc.
<b>Meeting 3</b>	With the girls, plan the schedule of events for the overnight Learn some songs	Start collecting permission slips
<b>Meeting 4</b>	Practice safety skills – buddy system, looking for site hazards, fire drill, etc. Practice simple first aid Check first aid kit with the girls – what are these things used for? Is everything current?	Make copies of equipment list and send home with the girls Collect the rest of the permission forms and any money.
<b>Meeting 5</b>	Discuss expectations and behaviors for the overnight – what is and is <b>not</b> acceptable Plan equipment needed Review and practice needed skills	Set up transportation system for the trip Call adults willing to take girls shopping for food and packing for trip
<b>Meeting 6</b>	Make kaper chart Review plans for the trip Answer questions/concerns	Check arrangements with drivers, shoppers, chaperones, etc.



## Checklist – Do I have it all?

- \_\_\_ Itinerary
- \_\_\_ Roster of participants
- \_\_\_ Confirmed reservations
- \_\_\_ Council Cares form submitted/approved if financial assistance is needed
- \_\_\_ Emergency Phone number for Council
  
- \_\_\_ Paperwork to bring with you
  - \_\_\_ Health History – both girl and adults
  - \_\_\_ Physician signed health records (if trip is more than 2 nights)
  - \_\_\_ Accident/Incident Report
  - \_\_\_ Emergency Contact information
  - \_\_\_ Medication information – All meds must be in original container with a signed note from the parent/guardian
  
- \_\_\_ Things to bring
  - \_\_\_ First Aid Kit (also one per car-if applicable)
  - \_\_\_ Confirmation of travel arrangements – keys and other items
  - \_\_\_ Review ‘car manners’ with girls and adults
  - \_\_\_ Receipts for all fees paid
  - \_\_\_ Check that everyone’s gear is packed into the cars

Suggestion: Use a notebook or folder to organize your paperwork so that everything is easily accessible.

**Let’s get going!**



## Sample list of girls packing list

Please check Safety Activity Checkpoints for more comprehensive lists, then customize it based on your plans.

- \_\_\_ Permission slip
- \_\_\_ Health history
- \_\_\_ Sleeping Bag/Bedroll
- \_\_\_ Pillow
- \_\_\_ Pajamas/sweat suit
- \_\_\_ Bandana/hat/visor
- \_\_\_ Closed-toe shoes
- \_\_\_ Jacket/sweatshirt
- \_\_\_ Rain gear
- \_\_\_ Change of clothes (socks, pants, shirt, underwear)
- \_\_\_ Toiletries
- \_\_\_ Small towel and washcloth
- \_\_\_ Flashlight with **new** batteries

- Make sure that everything is labeled. Do not pack valuables or items that are irreplaceable. Pack clothing that can be layered for better comfort.
- FAMILIES! Please be sure to keep us informed as to where you can be reached during the night. If your child needs to be picked up, we will need to contact you quickly.





## Supervision of Girls – Who should be chaperones?

Adults accompanying a group should be chosen for their patience, flexibility, and good judgment. They should understand their roles and responsibilities during the trip.

- The Leader should explain her/his expectations to the adults on the trip as early in the planning process as possible.
- Adults should understand the plans the girls have made for the trip.
- Adults should understand safety and emergency systems for the trip (at the site and while in transit) as well as the buddy system.
- Adults who will be driving need to practice safe driving.

Supervision means:

- Being a role model by your words and actions.
- Taking full responsibility for an activity or group of girls when asked to do so.
- Providing effective discipline when needed by taking the girl away from the group. Criticize the behavior, not the girl.
- Knowing where all the girls are at all times by performing regular head counts.
- Being visible to girls who need help.
- Helping girls understand how to do unfamiliar tasks while giving them real responsibility for finishing a task so that they see themselves as useful, competent and successful.
- Providing praise for effort and achievement.
- Intervening before injuries occur.
- Encouraging girls to try new things.
- Watching, Guiding, Directing.
- Being knowledgeable about the activity to be supervised and the potential for injury.

Supervision is **not**:

- Leaving the area when the girls have gone to bed.
- Being involved with the adults instead of the girls.
- Doing the project for the girls.
- Only interacting with your daughter.

Try to avoid having a girl and her parent/guardian in the same group when feasible. Both will have a better chance for success.



# Keeping Our Girls Safe – Our Primary Goal

## Background Checks for Chaperones

Girl Scouts of Central & Southern NJ (GSCSNJ) is committed to providing a safe and quality program for girls as they participate in Girl Scouts. In order to safeguard the girls in our care, criminal background checks will be conducted for all volunteers providing direct service to girls (this includes chaperones). The background check, includes criminal records searches of convictions, arrests, court records, inmate records, and sex offender registries.

## Volunteer Essentials and Safety Activity Checkpoints

Please refer to these comprehensive resources before, during and after any trip. You can find them on our website at [gscsnj.org/forms](http://gscsnj.org/forms)

## Forms

Communication with GSCSNJ is accomplished by the use of forms. Here are the forms you will need to complete/follow to have a safe and successful trip:

- Parental Permission
- Troop Trip Guidelines
- Online Troop Trip form (for 3 nights or more)
- Plan 2 insurance (option insurance for trips over 2 nights or attendees who are not registered Girl Scouts)
- Girl/Adult Health History
- Financial Aid (Council Cares)
- Injury & Incident Report

All of these forms may be found in this packet or on our website at: <http://www.gscsnj.org/council/forms-and-documents.html>

## Transporting Girls Reminders

For any driving, read Transporting Girls in Volunteer Essentials, and share the Checklist for Drivers with your chaperones. Here are some reminders that apply to travel:

- Drivers-must be 21+, background checked, registered members
- Route Selection-plan routes of no more than 6 hours of driving per day, unless you have relief drivers. Take breaks every 2 hours.
- Vehicles-must be insured, registered and in good repair
- Everyone must have a proper seatbelt or safety seat
- Supervision-if a group is traveling in one vehicle, there must be 2 unrelated, approved volunteers in the vehicle, one of whom is female. If group is traveling in more than one vehicle, the entire group must consist of at least 2 unrelated,



approved adults, one of whom is female. Plan so that a single a car is not separated from the others for an extended length of time.

- Caravans-Do not do this. This is when one car follows closely behind another. Make sure everyone has directions and participant paperwork. Plan catch-up stops so following drivers don't get nervous about losing the lead car.

## Inclusion

As you know, Girl Scout's promise to be a 'sister to every Girl Scout. In practice, that means we include others, even when doing so presents challenges. You might need to find ways to accommodate:

- Those who learn differently
- People with physical or mobility challenges
- Travelers with behavior that challenges others
- Girls who have little parental support
- Girls with financial challenges to pay for trips
- Those who have medical conditions, such as allergies, that may be unfamiliar to you

It is the responsibility of the troop adults to model respectful, inclusive behavior. This means that we make reasonable accommodations when possible. Inquire how to do that with direct, respectful questions. Address the girl when possible, and check in with the parents, too.

We hope this helps you in planning your troops trips. If you need additional support your Service Unit team is available as well as Council staff.

## Let's get going!



## **Procedures for Handling Emergencies and Serious Accidents**

*For serious accidents, major emergencies, camping disasters, fatalities, etc.*

If you are the Person in Authority on the scene of the emergency:

1. **CHECK** the scene and check the person
2. **CALL** 9-1-1
3. **CARE** for the person based on the conditions you find
4. On camp property, notify the Ranger on-site.
5. Put a responsible adult in charge of other troop members.
6. Notify the families of the injured person(s).
7. Call the Girl Scout Emergency Call Center **(877) 539-6711**, state the nature of your emergency. Be sure to give the operator your name and phone number with area code, where you can be reached.
8. Have troop emergency contact call families of uninjured persons.
9. For your protection, **DO NOT** give any statements or information to anyone but the police. Refer all media inquiries to the Girl Scout Corporate Headquarters in Cherry Hill.

*Girl Scouting builds girls of courage, confidence and character, who make the world a better place.*



## GUIDELINES FOR TROOP TRIPS

Troop Trip Form should be completed on line at <https://gscsnj.wufoo.com/forms/gscsnj-troop-trip-form/>

Troop leaders are reminded to conduct trips consistent with all GSCSNJ rules, regulations, and policies. These can be found on our website under the forms tab in Volunteer Essentials, Safety Activity Checkpoints, and Council Policies. Leaders are expected to review these requirements before planning a trip and adhere to them during the trip. **Permission from parents/guardians is required to take girls on any trip.**

TYPE OF TRIP	PROCEDURES	DEADLINE FOR APPROVAL
Day Trips	<ul style="list-style-type: none"> <li>• Discuss trip ideas/activities with girls.</li> <li>• Review the Safety Activity Checkpoints and Volunteer Essentials for the activities involved</li> <li>• Plan 2 Insurance is available</li> <li>• All adult chaperones must be registered and background checked</li> <li>• Record trip in VTK year plan</li> </ul>	No approval required.
Overnights 1 – 2 night	<ul style="list-style-type: none"> <li>• Discuss trip ideas/activities with girls.</li> <li>• Review the Safety Activity Checkpoints and Volunteer Essentials for the activities involved</li> <li>• Plan 2 Insurance is available</li> <li>• All adult chaperones must be registered and background checked</li> <li>• Record trip in VTK year plan</li> </ul>	No approval required.
Trips of 3 nights or more	<ul style="list-style-type: none"> <li>• Discuss trip ideas/activities with girls.</li> <li>• Review Safety Activity Checkpoints and Volunteer Essentials for the activities involved</li> <li>• Complete and submit Troop Trip Form online</li> <li>• Plan 2 Insurance is available</li> <li>• All adult chaperones must be registered and background checked</li> <li>• Record trip in VTK year plan</li> </ul>	Complete online form 4 weeks prior to travel dates.
International Travel	<ul style="list-style-type: none"> <li>• Discuss trip ideas/activities with girls.</li> <li>• Review the Safety Activity Checkpoints and Volunteer Essentials for activities involved</li> <li>• Contact council for details on planning international travel</li> <li>• Complete and submit Troop Trip Form online</li> <li>• Plan 3PI Insurance is available</li> <li>• All adult chaperones must be registered and background checked</li> <li>• Record trip in VTK year plan</li> </ul>	Complete online form 6 months prior to travel date. It is suggested to start planning 1 year prior to trip.
Troop meetings in homes	<ul style="list-style-type: none"> <li>• Review Safety Activity Checkpoints and Volunteer Essentials for activities involved</li> <li>• GSUSA and GSCSNJ discourage use of private homes for troop meetings</li> <li>• All homeowners insurance is primary insurance</li> </ul>	GSUSA and GSCSNJ discourage use of private homes for troop meetings.

\*Plan 2 Insurance is available for purchase for extended trips and non-members participating in trip/event. Personal insurance is always the primary insurance.





**Plan 2**  
**Enrollment Form**  
**Girl Scouts of Central & Southern NJ**

Name of person submitting this form \_\_\_\_\_

Contact phone number ( ) \_\_\_\_\_ Email \_\_\_\_\_

Service Unit Name \_\_\_\_\_ Troop number \_\_\_\_\_

**Schedule of Each Event**

Please provide Accident Insurance to cover all enrolled participants in the following approved, supervised Girl Scout activities.

Name and Location of Event	Beginning Date MM/DD/YYYY	Ending Date MM/DD/YYYY	Number of Participants	Number of Days	Number Participant days (participants X days)	Premium Each Day @ .11 cents	Total amount due

(Check made payable to **GSCSNJ** for the TOTAL PREMIUM shown above enclosed.  
MINIMUM PREMIUM is \$5.00)

Total Premium Amount Due \$ \_\_\_\_\_

*Please mail Check and form **4 weeks prior** to event to:*

Girl Scouts of Central & Southern NJ  
40 Brace Road  
Cherry Hill, NJ 08034



## Plan 3PI Enrollment Form for International Trips

1. Submit the completed enrollment form through the Girl Scout Council for Approval
2. Following council approval, the Council will process the completed enrollment form and troop trip roster. (Make check payable to GSCSNJ.)

Council Code No. **1 3 1**

Name of applicant \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Troop # \_\_\_\_\_  
 Service Unit \_\_\_\_\_

### Council approval is required

Please provide Accident and Sickness Insurance to cover all enrolled participants in the following approved, supervised Girl Scout Trip (except statutory employees covered under worker's compensation):

### Trip Schedule

Name and Location of Trip	Beginning Date MM/DD/YYYY	Ending Date MM/DD/YYYY	Number of Participants	Number of Days	Number Participant days (participants X days)	Premium Each Day @ \$1.17	Total amount due
Sample: Country	02/05/xxxx	02/09/xxxx	25	5	125	\$1.17	\$146.25

Total Premium Amount Due \$ \_\_\_\_\_

### Attention Troop Leader:

**Please attach the completed trip roster to this enrollment form.**

**Important Note to Leaders: Please prepare and bring a list of emergency parental, guardian or personal contacts and their telephone numbers for all participants with you during the trip**

(Check made payable to **GSCSNJ** for the TOTAL PREMIUM shown above enclosed.  
 MINIMUM PREMIUM is \$5.00)

*Please mail Check and form **4 weeks prior** to event to:*

Girl Scouts of Central & Southern NJ  
 40 Brace Road  
 Cherry Hill, NJ 08034



Girl Scouts of Central & Southern NJ, Inc.

RENTED AND LEASED VEHICLES

Please complete all the information that applies:

Troop Number(s): \_\_\_\_\_

Service Unit: \_\_\_\_\_

Name(s): \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #(s): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_  
(Area Code) (Area Code)

Destination: \_\_\_\_\_ Date(s): \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

# Girl Scouts: \_\_\_\_\_ # Non-Scouts: \_\_\_\_\_ # Adults: \_\_\_\_\_

Vehicle Type: (Bus \_\_\_\_ ) (Auto \_\_\_\_ ) (Pick Up \_\_\_\_ ) (Truck \_\_\_\_ ) (Other \_\_\_\_ ) (Number of Vehicles: \_\_\_\_ )

Vehicle Make: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_

**\*REMINDER CHECKLIST\***

\_\_\_\_\_ Certificate of Liability Insurance (Acord 25) from Rental Agency Submitted to GSCSNJ (\$1,000,000.00) when leasing a vehicle

\*\*Certificate holder must read: Girl Scouts of Central & Southern NJ, 40 Brace Rd, Cherry Hill, NJ 08034

\_\_\_\_\_ Rental/Lease Agreement Submitted to GSCSNJ

\_\_\_\_\_ Application for Troop Travel Submitted to GSCSNJ (Completed)

\_\_\_\_\_ Application for Troop Travel Approved

**If you have any questions, please contact a GSCSNJ council office**



## Girl/Adult Health History Form

Please print clearly in ink.

☐ ADULT MEMBER    ☐ GIRL MEMBER

### CONTACT INFORMATION

Troop # \_\_\_\_\_ ☐ Or Individual Girl    Service Unit: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Name and address (if different from girl's): (Complete for girl form only) \_\_\_\_\_

1. \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian Name and address (if different from girl's): (Complete for girl form only) \_\_\_\_\_

2. \_\_\_\_\_ Cell: \_\_\_\_\_

Custodial Care Information: ☐ Both Parents    ☐ One Parent (specify): \_\_\_\_\_

### HEALTH INFORMATION

Name of Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical/Hospital Insurance Carrier: \_\_\_\_\_ Policy/Group #: \_\_\_\_\_

Dental Insurance Carrier: \_\_\_\_\_ Policy/Group #: \_\_\_\_\_

Health Information: Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ ☐ Immunizations are up to date.

Date of last Tetanus shot: \_\_\_\_\_

Does participant have any physical, mental, or psychological conditions requiring medication, treatment, or other special restrictions or considerations? ☐ Yes ☐ No    If yes, please state medication and reason:

\_\_\_\_\_

Does participant take any prescribed medications or over-the-counter drugs on a regular basis? ☐ Yes ☐ No

If yes, please state medication and reason:

\_\_\_\_\_

Is participant restricted or limited from participating in any physical activity? ☐ Yes ☐ No

If yes, please explain:

\_\_\_\_\_



Participant has the following health conditions/allergies/dietary restrictions (food and medications):

- ☐ ADHD ☐ Asthma ☐ Diabetes ☐ Headaches ☐ Seizures ☐ Other: \_\_\_\_\_
- ☐ Allergies (Specify): \_\_\_\_\_

#### AUTHORIZATION

Emergency Contact (non-parent): \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

#### FOR GIRL – Parent/Guardian Authorization

This health form is completed and accurate. I know of no reason(s), other than the information indicated on this form, why my daughter/girl should not participate in the prescribed activities except as noted. In the event that my daughter/girl needs medical attention while participating in Girl Scout activities, I authorize the adult in charge to see that my daughter/girl receives routine healthcare, medications, reasonable first aid and to transport my child to a health care facility for emergency services as needed.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

#### FOR ADULT – Member Authorization

This health history is complete and accurate. I am able to engage in all prescribed activities except as noted.

Signature of adult member: \_\_\_\_\_ Date: \_\_\_\_\_

**To the parent/guardian:** The health of the girl is primarily the responsibility of her parents or guardians. The Girl Scout organization strongly recommends annual health examinations, dental checkups, and immunizations against preventable diseases. The Girl Scout policy on health and safety implies a responsibility to the participants for their protection. It also implies the right of the organization to be assured, as far as possible, that the participants are physically able to take part in the activities. \* A record of health examination (physical checkup) given by a licensed physician within the preceding 12 months is obtained before a girl participates in resident camping, in a trip of more than three days, or in contact sports on an organized, competitive basis.

**To the leader:** All leaders at GSCSNJ are advised to obtain and store girl health histories, and those of any adults attending troop trips. Health history forms can be submitted in a sealed envelope only to be opened in the event of an emergency. Due to HIPAA laws, a health history form cannot be required. For various reasons, some parents/guardians may object to immunizations or medical examinations. Provisions should be attempted for these girls to attend Girl Scout functions in a way that accommodates these concerns. The following activities can not be participated in without a completed and signed health history form: water sports, horseback riding, skiing, hiking, gymnastics, and other physically demanding activities.





## PARENT PERMISSION FORM FOR INDIVIDUAL TRIPS

This form is needed when a parent chooses to give permission for trips individually and/or trips 3 or more nights and/or over 350 miles from meeting location.

My Troop No:

Leader:

Phone No:

Permission for participation in (activity):

At (Location):

Date(s):

Cost:

Departure Time and Place:

Returning Time and Place:

Personal or Group Equipment:

Troop Leader or Event Coordinator:

Name of First Aider attending:

☐ Certification expiration checked ☐ Not needed for this event ☐ Provided at event

----- (Cut here and retain top portion. Return bottom portion to Troop Leader) -----

Our daughter

Troop No.

Has our permission to participate in the Girl Scout activity

On date(s)

at time

at (location)

Adult(s) accompanying my daughter will be (if required by leader to meet Safety Activity Checkpoints)

In case of emergency, we can be reached by phone at: (h)

(cell)

Name:

Address:

Additional Emergency Contact:

Phone No.:

Address:

Relationship:

Girl Scout Safety Rules in effect for this activity:

- Buddy system – no girl shall go anywhere without a buddy (adult or another girl)
- No alcohol or smoking is permitted
- Seat belts must be utilized for all passengers in every vehicle
- Car seats must be utilized when required by law
- Every car must have directions to the location of the event
- Every car must have a first aid kit
- If you are a driver, please make certain you have a current driver's license, insurance and the car is in good repair.

Additional information or special needs for this trip:

Signature of Parent/Guardian

Date



## YEARLY PERMISSION FORM FOR TROOP MEETINGS & TRIPS FOR YEAR 20\_\_ - 20\_\_

Girl's Name: \_\_\_\_\_ Troop #: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_ School: \_\_\_\_\_

Permission for Trips ☐ YES ☐ NO Initialed \_\_\_\_\_

My girl has permission to travel to, attend, and participate in troop and council sponsored activities that are less than 350 miles from her troop meeting location or less than 3 nights.

\* By checking 'no' I am requesting to sign individual permission slips for every trip.

**My daughter can return home from meetings by the following means (check all appropriate).**

\_\_\_\_\_ mother/father/guardian will pick her up  
 \_\_\_\_\_ is allowed to go home with fellow Girl Scout name \_\_\_\_\_  
 \_\_\_\_\_ is allowed to walk home \_\_\_\_\_ anytime \_\_\_\_\_ Alone \_\_\_\_\_ with \_\_\_\_\_  
 \_\_\_\_\_ is **NOT** allowed to leave with \_\_\_\_\_  
 \_\_\_\_\_ Other family members that might pick her up: \_\_\_\_\_

Please list any medical condition you would like the leaders to be aware of such as asthma, allergies (food or medicine or insect bites), etc. If any medication is being taken by your daughter during the meeting time or at any Girl Scout activity, please inform the leaders. **NOTE: Participants with allergies must fill out an Allergies and Anaphylaxis Emergency Action Plan Form, found under Forms at GSCSNJ.org**

Special dietary needs:

### Parent/Guardian Contact Information:

Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Child: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**TURN OVER – 2 sided form**



**If I cannot be reached in the event of an emergency, the following person is authorized to act in my behalf:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Relationship to Girl: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Physicians Name and Phone: \_\_\_\_\_

I have registered my daughter on line or I have given my daughter's troop leader permission to register her on line for the Girl Scout year. I give permission for my daughter to be a member of Girl Scouts of Central & Southern NJ.

**Parent/Guardian Agreement:**

I have read and understand this annual permission slip. I may change or revoke any aspect of this agreement at any time by submitting my request, in writing, to the troop leader.

Parent/Guardian Name \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MEDIA RELEASE FOR MINORS**

**For Troop Meetings and Activities from \_\_\_\_\_ to \_\_\_\_\_ Girl Scout year.**

**Media Permission**

When participating in Girl Scout activities I give my consent for my daughter to be interviewed, photographed, videotaped, or electronically imaged for the purposes of promotional materials, news releases, or other published formats for either the local Girl Scout Councils or Girl Scouts of the USA. \*The images will be sole property of the local Girl Scout Council or Girl Scouts of the USA. I hereby release and hold harmless the local Girl Scout Council and Girl Scouts of the USA from any claim arising from the use of these images.

NAME OF MINOR (please print): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DAYTIME PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ ADDITIONAL PHONE (optional) (\_\_\_\_) \_\_\_\_\_

Release for Minors (those under the age of eighteen): I, the undersigned, being a parent or guardian of the minor, hereby consent to the foregoing conditions and warrant that I have the authority to give such consent.

NAME OF PARENT/LEGAL GUARDIAN (please print): \_\_\_\_\_

**SIGNATURE OF PARENT/LEGAL GUARDIAN (REQUIRED):** \_\_\_\_\_

DATE: \_\_\_\_\_ PARENT/LEGAL GUARDIAN EMAIL ADDRESS\*: \_\_\_\_\_

*(\*will not be used for any other purposes or distributed to third parties)*



## Instructions for Completion of Council Cares Financial Assistance Application

By design this application should be filled out by the Parent or Guardian with assistance from the troop leader except when the Girl Scout is registered independently. It is the Council's goal to offer financial assistance to those in need. Our ability to award assistance is dependent upon the availability of funds.

Council offers the opportunity for all girls to participate in our Product Program Sales to assist with the funding of Girl Scout programs and events. Please ask your troop leader or call 856-795-1560 for information regarding our Product Program Sales.

### Things You Should Know:

- Maximum amount awarded for Troop Dues is \$40 annually
- Shop awards are valid for 30 days. You will not receive the awarded merchandise after 30 days.
- You will not be reimbursed for items previously purchased or money spent.
- Adult Volunteers needed to support the ratio of supervision for a program may apply for up to 50% of the cost of the program and required resources for their volunteer position.
- You can only apply for financial assistance for programs and materials to be used during the current Girl Scout year. The Girl Scout year begins October 1<sup>st</sup>.

## Completing the Application

1. **Part A:** General Information must be completed for all applicants.
2. **Part B:** If you need assistance with our membership fee only, complete sections A and B. Sign application and send all paperwork including your registration form to our Cherry Hill or East Brunswick Service Center.
3. **Part C:** The Troop Leader, Parent or Adult Applicant must complete. Please be sure to answer all questions fully. **Incomplete forms delay the approval process.**
4. **Part D:** This section should be completed by the Parent/Guardian of the Girl Scout. Information regarding income and expenses is required in order for to complete the review process. Attach a proof of income such as but not limited to, previous year's tax return, unemployment letter or current pay stub. Please provide any extraordinary financial circumstances which may be pertinent to your request. Criteria for financial awards are based on county median household income and income per capita information for the preceding 12 months. Make sure you have read and complete the application in its entirety before you sign and date.
5. Allow **1-2** weeks for processing a request (if application is complete).
6. You may scan and email this application to [councilcares@gscsnj.org](mailto:councilcares@gscsnj.org).
7. You may drop this application off at our Cherry Hill or East Brunswick service center.  
**Attn: Financial Assistance Application**
8. You may mail this application to the Service Center listed below:  
**Attn: Financial Assistance Application**

Girl Scouts of Central & Southern NJ  
40 Brace Road  
Cherry Hill, NJ 08034

# Application For Council Cares Financial Assistance

## Part A – General Information

.....  
**Name of applicant (please print clearly)** **Grade (girl)** **Date of Birth (girl)**

.....  
**Name of parent/guardian (if applicant is under 18)** **Phone Number**

.....  
**Address** **City/State/Zip**

.....  
**Email Address** **Troop #** **Service Unit**

**Currently Registered?** **Level** (Circle One) Daisy Brownie Junior Cadette Senior Ambassador  
 Adult (Circle One) Yes No **Registered Independently?**(Juliette) Yes No

**The following background data is requested to measure our progress toward serving girls and adults within our jurisdiction. Please check applicant's Race and Ethnicity:**

American Indian/Alaskan \_\_\_\_\_ Asian \_\_\_\_\_ Black/African America \_\_\_\_\_ Hawaiian/Pacific Islander \_\_\_\_\_

White \_\_\_\_\_ Other \_\_\_\_\_ Multiple \_\_\_\_\_ *Hispanic* \_\_\_\_\_ *Non-Hispanic* \_\_\_\_\_

## Part B - To Be Completed by Parent or Adult Applicant

### Request for Membership Fee

Girl Scouts of Central & Southern New Jersey is committed to ensuring all girls can participate in Girl Scouting, regardless of socioeconomic status. Membership financial assistance provides need-based financial assistance to individuals (girls and adult volunteers) looking to become Girl Scout members. Financial assistance is meant to be supplementary. Parents are encouraged to pay a portion of the \$40 fee (girls) and \$25 fee (adults) when possible.

**I am requesting Council Cares Financial Aid for membership registration due to financial need. GSCSNJ reserves the right to request proof of income.**

Amount paid by Family \$..... Total amount requested \$.....

.....  
**Parent Signature** **Date**

## Part C- To Be Completed by Troop Leader and/or Parent

(Please circle what is being requested)

**This Girl Scout has had the opportunity to participate in Council product program(s) in the past year: Yes/No (Circle One)**

Daisy: Tunic (size:     ), Starter Bag; Journey	\$
Brownie: Vest or Sash (size:     ), Starter Bag; Journey	\$
Junior: Vest or Sash (size:     ), Starter Bag; Journey	\$
Cad / Sr / Amb: Vest or Sash (size:     ), Starter Bag; Journey	\$
Uniform Components (Please circle all that apply): Membership Pin or World Trefoil Pin, Council ID Set, Troop Numerals, Insignia Tab, Flag Patch	\$
List Programs, Events, or trips	\$



Name(s) and Date(s):		\$
Name(s) and Date(s):		\$
Troop Dues:		\$
	<b>Total</b>	\$
	<b>Troop Contribution</b>	\$ -
<b>Grand Total = All expenses minus (-) troop contribution</b>	<b>Grand Total</b>	

**Leader Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Part D- To Be Completed by Parent/Guardian**

Parent Occupation(s)	
Daytime Phone Number	E-mail Address (if different from above)
Total annual household income (salaries, interest income, investments, alimony, child support, social security, public assistance, unemployment)	Last Year \$ Current Year \$

Indicate any extraordinary financial circumstances which might impact on the above (continue on another sheet if needed)

**Important Notes!**

**Be sure to fill this application out completely before submitting. Incomplete applications will delay the approval process.**

***Girl Scouts of Central & Southern NJ, Inc. will provide assistance to those in need depending on the availability of funds. We do not reimburse for any prior expenses or items that were purchased or paid for out of pocket.***

**Signature**

Parent/Guardian Signature (required)

Date:



## INJURY & INCIDENT REPORTING FORM

**The purpose of this form is to notify Council Staff when injuries occur. A form should be completed for all injuries (requiring more than a simple Band-Aid), regardless of severity. It may also be used to report accidents and serious incidents that are beyond normal conditions members should expect as part of Girl Scouting (e.g. fights, "near miss" accidents, lost children, etc.)**

Date Form Submitted \_\_\_\_\_ Date of Occurrence \_\_\_\_\_

Name of Person Submitting Form \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Name and Status of Person(s) Directly Involved:

Name

Status

\_\_\_\_\_

☐ Girl Member ☐ Adult Member ☐ Employee  
☐ Other \_\_\_\_\_

\_\_\_\_\_

☐ Girl Member ☐ Adult Member ☐ Employee  
☐ Other \_\_\_\_\_

\_\_\_\_\_

☐ Girl Member ☐ Adult Member ☐ Employee  
☐ Other \_\_\_\_\_

\_\_\_\_\_

☐ Girl Member ☐ Adult Member ☐ Employee  
☐ Other \_\_\_\_\_

The Occurrence took place during (please check one):

☐ Troop Meeting ☐ Troop Activity or Outing ☐ Troop Trip ☐ Troop Camping ☐ Summer Camp

☐ Council Sponsored Program or Event ☐ Other \_\_\_\_\_

Location of Occurrence \_\_\_\_\_

Address \_\_\_\_\_

Troop # \_\_\_\_\_

Brief Description of the Occurrence (add additional sheet of paper if necessary)

---

---

---

---

---

---

Was anyone injured?

☐ No

☐ Yes Name of Injured Person(s) \_\_\_\_\_

Description of Injury \_\_\_\_\_

Was Medical Attention Immediately Sought or Provided?

☐ No

☐ Yes Please describe \_\_\_\_\_

For girls, was her parent(s) present?

☐ Yes

☐ No

Name & Phone # of Party who informed parents \_\_\_\_\_

How and when were the parents informed? \_\_\_\_\_

SUBMIT COMPLETED FORM TO [incidentreport@gscsnj.org](mailto:incidentreport@gscsnj.org).

