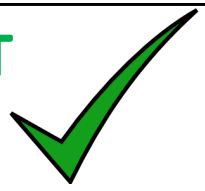


REGISTRATION FORM CHECKLIST



FOR INDIVIDUAL GIRL REGISTRATION

1. Where to Send Registration, deadline date

Girl's Name _____ Troop _____

2. Participant Info:

Determine which info you need

Grade _____ Age _____ Special needs _____

Address _____ City _____ Zip _____

E-mail _____

Parent Phone day () _____ night() _____ cell() _____

Emergency contact info _____

| Name | Relationship | phone # |
|------|--------------|---------|
|------|--------------|---------|

Person(s) authorized to pick up girl _____

3. Participant Choices: T-shirt size, menu selection, food allergies, dietary restrictions etc.

4.

Permission statement as needed:

Participation, photo release, medical treatment, membership, survey

____ (Initial) I give my daughter/dependent permission to participate in Service Unit ABC Fantastic Fandango

____ (Initial) I hereby consent that the videotapes, photographs, motion pictures, electronic images and/or audio recordings of my daughter/dependent may be used by Girl Scouts for public relations and publicity purposes. I understand that her last name and residence will not be used for publicity purposes.

____ (Initial) In the event of an emergency, every effort will be made to contact a parent/guardian or emergency contact. If no contact can be made, I hereby give authorization to Girl Scouts of Northern California to seek treatment for my child and/or dependent minor by a licensed physician pursuant to California Family Code Section 6910 and California Civil Code Section 25.8. I know of no reason(s) why my daughter/dependent may not participate in prescribed activities except as noted on the Health History Form.

____ (Initial) I acknowledge that my daughter/dependent will make the Girl Scout Promise and accept the Girl Scout Law. The registrant has my permission to join Girl Scouts. [Use statement for recruiting events]

____ (Initial) I understand that my daughter may occasionally be asked to participate in evaluations/surveys as part of her Girl Scout activities. I understand that her participation is voluntary, and that she will neither receive compensation of any form for participating nor will her standing in her Girl Scout sponsored programs be effected, if she chooses not to participate. I further understand that my daughter's confidentiality will be protected throughout the entire project, and that she will never be identified in any publication, written or spoken. I understand that she may discontinue taking evaluations/surveys at any time without consequence.

Parent/Guardian Name _____ **Signature** _____

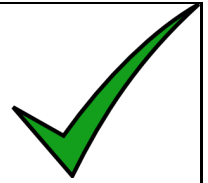
5.

Payment Reminder

I have enclosed my check for _____ Registration fee _____
 \$xx # T Shirts _____ @ \$xx each _____ Size(s) ____ S ____ M ____ L

Total Enclosed _____

REGISTRATION FORM CHECKLIST



FOR TROOP/GROUP REGISTRATION

1. Where to Send Registration, deadline date

2. Group Troop _____ School _____ Grade Level (Daisy, Brownie, etc.) _____

Contact Info: Leader/Advisor Name _____ E-mail _____

Determine which Address _____ City _____ State _____ Zip _____
info you need

Phone Day () _____ Night () _____ Cell () _____

Supervising adult at event: _____ Cell () _____

Person who attended other required course (e.g. camping, first aid)

Emergency contact info _____

(person not attending event) Name _____ Phone # _____

3. Participant Choices: Activity or workshop choices, T shirt sizes, menu selections, kaper selections

4. _____ # of Girls Attending x \$xx each \$ _____

Registration & _____ # of Adults Attending x \$xx each \$ _____

Payment Info _____ # of Patches x \$xx each \$ _____

Total Enclosed \$ _____