

Event Registration Form - Troop/Group

Event Name _____ Date _____ Session _____

Alternate Session: Date _____ Session _____

Troop # _____ Service Area _____

Adult In Charge _____ Program Age Level:

Email Address _____ Daisy

Street Address _____ Brownie

City, Zip _____ Junior

Day Phone _____ Evening Phone _____ STUDIO 2B

Girls		
Girl's Name	Gr.	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____
16. _____	_____	_____
17. _____	_____	_____
18. _____	_____	_____
19. _____	_____	_____
20. _____	_____	_____
(continue on additional sheets if necessary)		

Adults	
Adult's Name	Phone
(check Safety Wise Standard #13 and event info. for ratios)	
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
(continue on additional sheets if necessary)	

Photo Release

Please place an asterisk (*) by the name of any girl who **does not** have a signed photo release giving permission to the Girl Scouts of Indian Waters to use a photograph of her for publicity purposes.

Payment

_____ # of Girl Scouts x \$ _____ (fee) = _____

_____ # of Non-Girl Scouts x \$ _____ (fee + \$10/GSUSA membership registration fee) = _____

_____ # of Adults x \$ _____ (fee) = _____

Less Cookie Dough (if used) _____

Less Financial Assistance Requested (attach "Financial Assistance Form") _____

Total Enclosed _____

Send checks made payable to:
 Girl Scouts of Indian Waters Council
 4222 Oakwood Hills Parkway
 Eau Claire, WI 54701
 Attn: (event name)