Girl Scouts of Virginia Skyline Council

PROGRAM REGISTRATION FORM

Please use a separate form for each program event registration. Complete all the information clearly and carefully. Send the completed registration form with fees to the **registrar** listed for the event. Or send to GSVSC, 3663 Peters Creek Road, NW, Roanoke, VA 24019. Make checks payable as instructed in the specific information regarding registration for the event. Credit cards are accepted for some event fees. See the event description.

Program name:	
Location:	
First choice: Date:	Time:
Second choice: Date:	Time:
Do you wish to be placed on a waiting list if the event is full? ☐Yes ☐No	

Age level: ☐Daisy ☐Brownie ☐Junior ☐Cadette ☐Senior ☐Ambassador ☐Adult		
Troop/group number:	**OR** ☐Individual	**OR** ☐Non-Girl Scout
Service unit:		
For troop/group: Leader's name:		
For individual: Girl/adult's name:		
Mailing address:		
City:	State:	Zip:
Day phone number: - -	Evening phone number: - -	
E-mail address:		
Can you receive e-mail attachments? ☐Yes ☐No	Do you prefer: ☐E-mail or ☐Mail notices about events?	
Emergency contact during event:		
Phone number: - - or - -		

ADULTS – All troops/groups must meet Safety Activity Checkpoint guidelines for minimum girl/adult ratios. You may also need a certified first-aider. A minimum of two adults must be listed on all troop/group registration forms. Include first and last names, complete addresses, and phone numbers. For additional names, attach another sheet of paper. Please star (*) adults who are not registered Girl Scouts.

NAME	ADDRESS	PHONE NUMBER
		- -
		- -
		- -
		- -
		- -
		- -

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GIRLS – Include first and last names, complete addresses, and phone numbers. For additional names, attach another sheet of paper. Please star (*) girls who are not registered Girl Scouts. Permission forms must accompany the troop/group to the event.

NAME	AGE/GRADE	ADDRESS	PHONE NUMBER
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Please list any special needs (auditory, visual, ambulatory, etc.). Be specific.

Information for an **individual** attending an event:

My (our) daughter/ward has permission to attend the event listed on the front of this form. I authorize the event staff to secure necessary emergency medical care and treatment in case of an emergency, if I cannot be reached. I understand that if an emergency does arise, I will be notified as soon as possible. I give permission for my daughter/ward to appear in photos for publicity of Girl Scouts of Virginia Skyline Council.

Parent/guardian signature: _____ Date: _____

For LIT (Leader-in-Training) Home Study, please check one: I will do my LIT apprenticeship work with a troop at this age level: ☐Daisy ☐Brownie ☐Junior
Additional information needed for event (i.e., country choices for International Fair, etc.):

Number of girls attending:	x	Program fee/deposit: $	=	$
Number of adults attending:	x	Program fee/deposit: $	=	$
Number of adults attending:	x	Program fee/deposit: $	=	$
Number of other items:	x	Item cost: $	=	$

Type of other items (t-shirts, patches, etc., as listed in the event description):	
If ordering t-shirts, please list sizes: ___ YM ___ YL ___ AS ___ AM ___ AL ___ AXL ___ AXXL ___ AXXXL	
TOTAL DUE: $	**Fee paid by: ☐Check ☐Money order ☐Credit card**
CREDIT CARD INFORMATION: ☐Visa ☐MasterCard ☐Discover ☐American Express	

Account number:	Expiration date:	
Security (CVV/CVC) code:	Charge Amount: $	
Cardholder's name:	**Cardholder's signature:**	
Cardholder's billing address:		
City:	State:	Zip:

Don't forget to complete the necessary trip application form and send it to your service unit manager for approval!

Girl Scouts of Virginia Skyline Council Cancellation Policy

GSVSC Cancellation Policy is in effect for all camps, events, trainings, and trips registered through the council office. Our procedures are as follows:

1. Refunds will not be given for programs, events, camps or trainings under $5.
2. Refunds for cancellations will be processed as follows:
   - Five or fewer business days before the event 0%
   - Six to 10 business days before the event 50%
   - 11 to 15 business days before the event 75%
   - 16 business days before the event 100%

FOR OFFICE USE ONLY	
Date received:	Confirmation sent:
Amount: $	Receipt number: