

Girl Scouts of Virginia Skyline Council | The Skyline Adventurers
ADVENTURERS TRAVEL & TRIPS APPLICATION FOR GIRLS

DIRECTIONS

1. Fill out your application completely. Additional pages may be attached if necessary. Complete a separate application for each event.
2. Your parent or guardian must sign the application form.
3. Send your completed application to the contact listed in the event/trip information by the deadline.
4. Be sure to include the names of two references on this application. These should be adults who know you well, but are not relatives. Adventurers will reach out to your references regarding this travel/trip application.

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|---|--|-------|---|--------|------|
| Girl's Name: | | | | | |
| Address: | | City: | | State: | Zip: |
| Girl's Phone #: | | | Girl's Email: | | |
| Birthdate: | | Age: | Grade in school at time of application: | | |
| Parents' Names: | | | | | |
| Parents' Phone #: | | | Parents' Email: | | |
| I am applying for the following trip/travel event: | | | | | |
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| 1. Why do you want to participate in this opportunity? | | | | | |
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| 2. What experiences, skills, and knowledge do you have that relate to this opportunity? | | | | | |
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| 3. List three experiences in Girl Scouting that have meant the most to you. Why? | | | | | |
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4. List your camping and outdoor experiences, including first aid, water safety, and any other certifications relevant to the event.

5. Have you become acquainted with people from different social, racial, cultural, religious, and economic backgrounds? What did you learn and/or gain from these experiences?

6. Describe your participation in extracurricular activities and list your experiences in leadership positions.

7. List your trip experiences away from home without your family (length of time, where, when, with whom). What impact did they have on you?

8. What language(s) do you speak?

9. Additional comments:

I have asked these people to serve as references for me (Adventurers coordinators will contact them):

| NAME | EMAIL | PHONE |
|------|-------|-------|
| | | |
| | | |

Applicant's Signature:

Date:

PARENT/GUARDIAN PERMISSION FOR MINOR TO PARTICIPATE IN EVENT

I have read my Girl Scout's application and the event description. To the best of my knowledge, my Girl Scout has an interest in participating in the event and has my permission to apply.

Signature of Parent/Guardian:

Date: