Troop/Group Trip Report Form

By evaluating your troop/group experience on this recent excursion, we are better able to help other troops plan a successful and fun adventure to similar locations. *This form is to be completed and returned to your Field Director ASAP for any trip requiring an "Intent to Travel" form to have been filed with Council.*

Thank you for your cooperation.

Service Uni	t:	Troop/Group #:		
Leader Nam	ne:			
Age Level:	☐ Brownies ☐ Girl Scouts 13-15	☐ Juniors ☐ Girl Scou	_	irl Scouts 11-13
Report of tr	oop/group trip to:			
1. Was the	original itinerary followed a	s planned?	☐ Yes	□ No
If no, please	e explain below:			
	<u>CHANGES</u>		<u>REASONS</u>	
2. Did you k	eep within your estimated l	budget?	☐ Yes	☐ No
If no, how m this extra ex	uch additional money was pense?	needed? \$		How did you meet
3. Did anvo	ne get sick or injured during	a the course o	of the trip?	Yes □ No
If yes, please		go oou.oo o	op.	

Over, please!

4.	How were your a Adequate		s? □ Excellent	☐ Other (please explain)		
5.	5. What specific recommendations do you have regarding accommodations?					
6.	What were the hi	ghlights of this	trip?			
7.	How do you feel	that the trip has	s enriched the troop's	s/group's Girl Scout program?		
8.	Please use the specific troops/groups do			s or recommendations for other		
Signature of Leader: Date:						
Address:						

Girl Scouts of Rhode Island, Inc.