

# Girl Member Registration

check one:  New Member  Re-registering Troop# \_\_\_\_\_

<b>Girl Information</b>	Name: First _____ Middle _____ Last _____		
	Address _____		Apartment _____
	City _____	State _____	Zip Code _____
	Home Phone _____		Girl Email (if girl is 13 and up, otherwise use family email address) _____
<b>Demographics</b>	Date of Birth: (mm/dd/yy) ____/____/____		School Grade: _____
	Number of years as Girl Scout: _____		School Name: _____
	Custodial Care: (check one) <input type="radio"/> Both Parents <input type="radio"/> Mother/Guardian Only <input type="radio"/> Father/Guardian Only <input type="radio"/> Other _____		
<p>Girl Scouts respects and welcomes people from all backgrounds and abilities. By completing the following optional question, you can help ensure community support and funding for Girl Scouts in your community. This information is used for statistical purposes only. Thank you for providing the information requested.</p> <p>She is (check all that apply): <input type="radio"/> American Indian or Alaskan Native <input type="radio"/> Asian <input type="radio"/> Black or African American  <input type="radio"/> Hawaiian or Pacific Islander <input type="radio"/> White <input type="radio"/> Other (please specify) _____</p> <p>She is Hispanic or Latina: <input type="radio"/> yes <input type="radio"/> no</p>			
<b>Parent/Guardian 1</b>	<input type="radio"/> Address is same as girl		
	Parent/Guardian 1 Name: First _____ Middle _____ Last _____		
	Address (if different from girl) _____		Apartment _____
	Employer _____	Occupation _____	
	Home Phone _____	Cell Phone _____	
<b>Parent/Guardian 2</b>	<input type="radio"/> Address is same as girl		
	Parent/Guardian 2 Name: First _____ Middle _____ Last _____		
	Address (if different from girl) _____		Apartment _____
	Employer _____	Occupation _____	
	Home Phone _____	Cell Phone _____	
<b>Emergency contact</b>	Emergency Contact Name (other than parent): First _____ Last _____		
	Daytime Phone _____	Evening Phone _____	Cell Phone _____
<b>Pathway</b>	<p>Girl Scouts offers more choices than ever! Which Pathway are you interested in? (Check all that apply.)</p> <p><input type="radio"/> Camp: Experience the great outdoors at safe, overnight or day camp. <input type="radio"/> Events: Attend events centered on topics that secure environment. <input type="radio"/> Series: Explore your interests in a series of activities without interest you most. <input type="radio"/> Travel: Travel across town, throughout the country, or committing to a full year. <input type="radio"/> Troop: Participate in exciting activities that last around the world. <input type="radio"/> Virtual: Interact online with girls and volunteers in a throughout the school year.</p>		
<b>Payment/Donation</b>	Family Partnership Donation (supports local council): <input type="radio"/> \$50 <input type="radio"/> \$25 <input type="radio"/> \$15 <input type="radio"/> Other \$ _____		
	Another family member already supports Family Partnership! Name: _____ Troop: _____		
	Method of Payment: <input type="radio"/> Cash <input type="radio"/> Check (payable to GSSNE) <input type="radio"/> Money Order <input type="radio"/> VISA <input type="radio"/> MasterCard <input type="radio"/> American Express		
<b>Payment/Donation</b>	Annual Registration Fee: \$ 25.00	Name _____	on _____ Credit _____ Card: _____
	Donation: \$ _____		
Total: \$ _____			
<b>Permission</b>	<p>We acknowledge that the registrant will make the Girl Scout Promise and accept the Girl Scout Law. The registrant has our permission to join Girl Scouts. We understand that when participating in Girl Scout activities the registrant may be photographed for print, video, or electronic imaging. We understand that the images may be used in promotional materials, news releases, and other published formats for either GSSNE or Girl Scouts of the USA. We acknowledge that the images will be the sole property of either GSSNE or Girl Scouts of the USA. I understand and agree that it is my duty to make and provide safe and on time transportation arrangements to and from troop meetings and activimsct4now@cox.netties and failure to do so can result in the expulsion of the girl from the troop.</p>		
	Signature of Parent/Guardian _____	Date _____	
<input type="radio"/> I DO NOT give permission for the registrant to be photographed, videotaped or otherwise electronically imaged.			

**Membership dues are not refundable or transferable to another person.**