

GirlMemberRegistration new england www.gssne.org **Checkone:** O New Member Re-registering Troop# Information Middle Name: First Address Apartment City Zip Code Home Phone Girl Email (if girl is 13 and up, otherwise use family email address) Date of Birth: (mm/dd/yy)_____/___ School Grade: _ Number of years as Girl Scout:__ School Name: Custodial Care: (check one) OBoth Parents ○ Father/Guardian Only ○ Other ∩Mother/Guardian Only 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. $\bigcirc\,\mathsf{Black}\,\mathsf{or}\,\mathsf{African}\,\mathsf{American}$ American Indian or Alaskan Native She is (check all that apply): Asian O Hawaiian or Pacific Islander O White Other (please specify) She is Hispanic or Latina: ○ yes ○ no ○Address is same as girl Parent/Guardian 1 Name: First Middle Last Address (if different from girl) Apartment Employer Occupation Home Phone Cell Phone **Business Phone Email Address** Address is same as girl Parent/Guardian 2 Name: First Middle Address (if different from girl) Apartment Employer Occupation Home Phone Cell Phone **Business Phone Email Address** Emergency Contact Name (other than parent): First Last Daytime Phone **Evening Phone** Cell Phone Girl Scouts offers more choices than ever! Which Pathway are you interested in? (Check all that apply.) ○ Camp: Experience the ○ Events: Attendevents ○ Series: Explore your interests ○ Travel: Travel across town, ○ Troop: Participate in ○Virtual: Interact online with great outdoors at centered on topics that in a series of activities withoutthroughout the country, or exciting activities that last girlsandvolunteersina committing to a full year. safe, overnight or day camp. around the world. interest you most. throughout the school year. Family Partnership Donation (supports local council): \bigcirc \$50 ○\$25 ○\$15 Other\$_ Another family member already supports Family Partnership! Name: Method of Payment: ○Cash ○ Check (payable to GSSNE) O Money Order \bigcirc VISA MasterCard Annual Registration Fee: \$ 25.00 Name on Credit Card: _ Donation: Credit Card#:_ Cardholder Signature: _ 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 activities and failure to do so can result in the expulsion of the girl from the troop.