



Girl Member and Event Registration Through 09/30/2017

Return the completed registration and the full amount to: Joann Carlson, 212 West 11th Street, Muscatine, IA 52761 -- muscgirlscouts@gmail.com -- Please make checks made payable to Girl Scout Service Unit 836. If not registered include the \$15 annual membership dues and event fees. Grants are available upon request. Membership dues are not refundable or transferable to another person.

Girl Information

First Name _____ Middle Initial _____ Last Name _____
 Address _____ Apt #/PO# _____
 City _____ State _____ Zip _____ Home Phone (_____) _____
 Girl Cell Phone (_____) _____ Girl Email Address _____ I wish to opt out: Texts Emails
(Only if 13 years old or older) *(Only if 13 years old or older)*

Demographics

Date of Birth: (mm/dd/yyyy) ____/____/____ School Grade: _____ Girl is: Reregistering in Girl Scouts New to Girl Scouts
 Number of Years as a Girl Scout: _____ School Name: _____
 Custodial care: *(check one)* Both Parents Mother/Guardian Only Father/Guardian Only Other _____
 Girl Scouts respects and welcomes people from all backgrounds and abilities. By completing the following optional questions, 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.
 Girl is: *(check all that apply)*
 American Indian or Alaskan Native Asian Black or African American Hawaiian or Pacific Islander
 White Other (please specify) _____ I choose not to share this information at this time.
 Hispanic or Latina: Yes No I choose not to share this information at this time.

Parent/Guardian 1

First Name _____ Middle Initial _____ Last Name _____
 Address _____
 Address is same as above Girl Info *(list address if different from girl)* City _____ State _____ ZIP _____
 Employer _____ Home Phone (_____) _____
 Email Address _____ Cell Phone (_____) _____
(If different from girl)

Parent/Guardian 2

First Name _____ Middle Initial _____ Last Name _____
 Address _____
 Address is same as above Girl Info *(list address if different from girl)* City _____ State _____ ZIP _____
 Employer _____ Home Phone (_____) _____
 Email Address _____ Cell Phone (_____) _____
(If different from girl)

Event

Event Name _____ Event Date ____/____/____ City & Location _____
 Emergency Contact Name _____ Phone # (_____) 260-2398
 GSEIWI is committed to inclusion and welcomes those of all abilities. For special accommodations, indicate need and contact the event coordinator.
 Special Accommodations _____

Adult Info

Name of Adult Attending _____ Attending as chaperone Attending as event volunteer
 Address _____
 Address is same as above Girl Info *(list address if different from girl)* City _____ State _____ ZIP _____
 Home Phone (_____) _____ Cell Phone (_____) _____ Email _____
 Emergency Contact Name(s) _____ Phone # (_____) _____ Special Accommodations _____

Permission

We acknowledge that the registrant will make the Girl Scout Promise and accept the Girl Scout Law. The registrant has permission to join Girl Scouts and has permission to attend the event listed above. We agree to abide by all registration guidelines and health/safety policies.
 Signature of Parent/Guardian _____ Date ____/____/____
 When participating in Girl Scout activities the registrant may be photographed for print, videotaped or electronically imaged. Images may be used in promotional materials, news releases, and other published formats for either the local Girl Scout councils or Girl Scouts of the USA. The images will be the sole property of either the local Girl Scout council or Girl Scouts of the USA. I wish to opt out at this time.

Payment

Payment Information: Girl Membership Dues \$ 15 + Event Fee \$ _____ = Total Due \$ _____
 Check/money order to Muscatine Program Credit attached (for event fee only) Grant forms attached
 GS Service Unit 0836
 Paying via PayPal ... Still need to mail or email form to Joann Carlson