

Complete this initial roster and check the appropriate box (Girl Scouts of Middle Tennessee realizes that the final roster submitted may vary from the roster below):

| | Name | Girl | Adult |
|----|------|------|-------|
| 1 | | | |
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If you need additional space, please attach a new sheet of paper.

For trips lasting three nights or more, insurance coverage must be purchased for the entire trip. Once your trip is approved, you will be contacted to purchase insurance.

Trip Destination(s): _____

Trip Date(s): _____

CONTRACTS

Will your troop be coordinating any contracts involving money? Yes No

If yes, please submit a copy of the contracts for Girl Scouts of Middle Tennessee to keep.

TRAINING

Check the appropriate training the adults participating with this trip have taken:

GS101 Youth Protection First Aid/CPR Camp Prep Camp Ready

Camp Information and Procedures Outdoor Skills

List other relevant training you have taken: _____

What is the Girl Scout troop's past travel/overnight experience? _____

ABOUT YOUR TRIP

A Girl Scout trip is a learning experience. If a parent per girl is planning on participating, re-evaluate your girls' readiness. They may not be prepared for an extended trip. Note that family trips and/or high number of adults are not permitted.

What is the purpose of this trip? How does it fit into Girl Scout Program? _____

How have the girls been involved in planning this trip? _____

How does this trip fit into on-going troop programs? _____

How will the Girl Scout troop finance the trip? (Troops must submit the Permission to Conduct a Money Earning Project form for any money-earning projects other than Fall Product and Cookie programs.)____

SIGNATURE AUTHORIZATION

I agree to follow all guidelines and complete all final paperwork for this trip and related activities.

Trip leader's signature: _____ Date: _____

Girl representative signature: _____ Date: _____

SUBMISSION INSTRUCTIONS

Mail to:
Girl Scouts of Middle Tennessee
Attn: Troop Travel
4522 Granny White Pike
Nashville, TN 37204

Fax to: 615-460-0236
Email to: djohnson@gsmidtn.org

Keep a copy for your files.