



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			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

\*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

Name of Volunteer(s) with the trainings listed above: \_\_\_\_\_  
 \_\_\_\_\_

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 may 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: 615-460-0255



Email to: [volunteerresources@gsmidtn.org](mailto:volunteerresources@gsmidtn.org)

**Don't forget to keep a copy for your files!**

