

# GIRL SCOUTS OF MIDDLE TENNESSEE

## GIRL INNOVATORS PROGRAM REQUEST

A day use or overnight reservation must be confirmed prior to requesting Girl Innovator programs at a camp location. Note: All participants must also complete the Participant Health History Record and General Liability Waiver, and bring it to each scheduled program site.

### TROOP/GROUP INFORMATION

Troop #: \_\_\_\_\_ Service Unit #: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
First Last

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

### PARTICIPANTS

Indicate the number of program participants in each age level.

Daisy (grades K-1) \_\_\_\_\_ Brownie (grades 2-3) \_\_\_\_\_ Junior (grades 4-5) \_\_\_\_\_  
Cadette (grades 6-8) \_\_\_\_\_ Senior (grades 9-10) \_\_\_\_\_ Ambassador (grades 11-12) \_\_\_\_\_  
Adults (18+) \_\_\_\_\_

We must have the following information in advance so that we may staff our program appropriately.

Do any participants have special needs? No Yes

If yes, please explain:

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### LOCATION OF RESERVATION

Camp Holloway  Camp Sycamore Hills  Camp Piedmont

Council  Off-Site Travel (List Location) \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Estimated time: \_\_\_\_\_ a.m. p.m. (please circle one)

Departure Date: \_\_\_\_\_ Estimated time: \_\_\_\_\_ a.m. p.m. (please circle one)

Day use only  Overnight stay (Indicate units) \_\_\_\_\_

### SUBMISSION INSTRUCTIONS

#### Send to:

Girl Scouts of Middle  
Tennessee  
Attention: Samantha Keeney  
4522 Granny White Pike  
Nashville, TN 37204

Fax: (615) 460-0227

Email: [skeeney@gsmidtn.org](mailto:skeeney@gsmidtn.org)

**Step 1:** Have your reservation secured if using a council property.

**Step 2:** Complete the fee chart on the next page. Add subtotals A & B to total your final fee. *Note Minimum and maximum participant requirements.*

**Note:** All requests are due no later than 30 days prior to the event date. Late requests may not be accommodated.

We will email or call to confirm and, if needed, discuss any scheduling conflicts. Payment is due with this request. Final number of participants is expected 30 days prior to your event.

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Grade levels: Daisy: K, 1 | Brownie: 2, 3 | Junior: 4, 5 | Cadette: 6, 7, 8 | Senior: 9, 10 | Ambassador: 11, 12

If you are choosing a travel option, please be sure to calculate with the offsite travel price. (Offsite constitutes any location that is not Girl Scouts of Middle Tennessee property)

Program	Circle Location	Circle level of participants	Min/Max number of participants	Girls + Adults <sup>†</sup> = Total				Price Per Person	Offsite Travel Fee	=	Subtotal
					+	=					
Lego Robotics*	S,H,P,C,T	B, J, C, S, A	6/14		+	=		x \$10	+ \$13	=	\$
Marble Maze	S,H,P,C,T	D, B, J, C, S, A	6/24		+	=		x \$7	+ \$10	=	\$
Marshmallow Shooter	S,H,P,C,T	D, B, J, C, S, A	6/16		+	=		x \$10	+ \$10	=	\$
Mission Eggpossible	S,H,P,C,T	B, J, C, S, A	6/24		+	=		x \$7	+ \$10	=	\$
Ozobots*	S,H,P,C,T	B, J, C, S, A	6/24					x \$10	+ \$10		
Paper Circuits**	S,H,P,C,T	J, C, S, A	6/16		+	=		x \$10	+ \$10	=	\$
Slime	S,H,P,C,T	D, B, J, C, S, A	6/24		+	=		x \$7	+ \$10	=	\$
Spaghetti Towers	S,H,P,C,T	D, B, J, C, S, A	6/24		+	=		x \$7	+ \$10	=	\$
Squishy Circuits	S,H,P,C,T	D, B, J, C, S, A	6/24		+	=		x \$7	+ \$10	=	\$
								<b>Final Fee</b>		=	\$
<b>Example - Travel</b>	S,H,P,C, <b>I</b>	D, B, <b>J,C</b> , S, A	6/24	12	+	=	12	x \$7	+ \$10	=	\$ 94
<b>Example</b>	S, <b>H</b> ,P,C,T	D, <b>B</b> , J, C, S, A	6/24	12	+	=	12	x \$7	+ \$10	=	\$ 84

\*These programs can last longer, or be a multi day series. Contact Sam Keeney at [skeeney@gsmidtn.org](mailto:skeeney@gsmidtn.org) or 615-460-0227 for extended time pricing.

\*\* Daisies and Brownies can do paper circuits if they have already done a Squishy Circuits session.

<sup>†</sup> Adults are not required to participate in the programs, if they are, then they are included in the cost.