

Adult Education Session Registration Form



Girl Scouts.

ONE COURSE/ONE PERSON PER FORM PLEASE

FOR OFFICE USE ONLY

Mail to: Girl Scouts of Greater Iowa, Attn: Adult Ed
10715 Hickman Road, Des Moines, IA 50322
Phone In: (515) 278-2881 or (800) 342-8389
Fax To: (515) 278-5988
Email To: AdultEd@gsiowa.org

DATE REC'D _____	COMPLETED _____	NO SHOW _____
\$ REC'D _____	CANCELLED _____	WALK IN _____
CHECK # _____	AMOUNT ENCLOSED _____	

Confirmation and maps are sent only for overnight/retreat courses. Otherwise, participants are notified only if a change in time or place occurs or a session is cancelled. Please contact the office if you find you are unable to attend a session. We often have waiting lists for trainings.

Entire Course Title _____ Date _____
Location _____ Time _____ Cost _____
Name _____ Service Unit _____
Address _____
City _____ State _____ Zip _____
Email _____
Day Phone _____ Evening Phone _____ Cell Phone _____
Troop Age Level (circle): Daisy Brownie Junior Cadette Senior Ambassador
Special Request or Comments _____
Method of Payment: Cash Check MasterCard Visa Discover American Express
Credit Card Number: _____ V Code*: _____
Expiration Date: _____ Signature: _____

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Credit Card Number: _____ V Code*: _____
Expiration Date: _____ Signature: _____