



Event and Activity Application Girl Scouts of Greater Iowa

Attention: Regional Director

Please fill out this form **ONLY** if one or more of the following applies. Please check all that apply.

- It is a Service Unit event. Name of Service Unit: _____
- It is an event being planned for two or more troops to attend.
- It is an activity or event being held in the summer.
- It is a troop camping event held on property that is not owned by the council.
- It is one of the listed activities that requires Council approval (see the list under Council Approval).
- It is a simple overnight trip (see *Safety-Wise* page 46).

If your event/activity meets one or more of the above requirements, please fill out this form and return it **SIX WEEKS PRIOR** to the event. Please see below for mail address and fax number.

Event/Activity Organizer: _____ Day Phone: _____ Night Phone: _____
 Address: _____ City: _____ Zip: _____
 Email Address: _____

Required First Aider: _____ Day Phone: _____ Night Phone: _____
 Address: _____ City: _____ Zip: _____
 Type of Certification: _____ Expiration Date: _____

Event/Activity - Title: _____ Date: _____
 Location: _____ Age Level: _____ Troop #: _____

Estimated Number of Participants: _____ Girls _____ Adults _____
 Are all participants registered Girl Scouts? Yes No* ***Note: Non-registered participants require additional insurance.**

Council Approval Required

If you are planning to do any of the following activities, please check all that apply and you **must** have Council approval.

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|---|---|--|--|---|
| <input type="checkbox"/> Archery | <input type="checkbox"/> Canoeing | <input type="checkbox"/> Rafting | <input type="checkbox"/> Skiing | <input type="checkbox"/> Backpacking |
| <input type="checkbox"/> Challenge Course | <input type="checkbox"/> Rappelling | <input type="checkbox"/> Snow Shoes | <input type="checkbox"/> Boating | <input type="checkbox"/> Horseback Riding |
| <input type="checkbox"/> Sailing | <input type="checkbox"/> Tubing | <input type="checkbox"/> Water Skiing | <input type="checkbox"/> Swimming | <input type="checkbox"/> Kayaking |
| <input type="checkbox"/> Wind Surfing | <input type="checkbox"/> Simple Overnight | <input type="checkbox"/> Hayrack Rides | <input type="checkbox"/> Outdoor Cooking | |

(* Items below must be completed for "Council Approval" activities.)

****Certified Adult for Activity:** _____ Day Phone: _____ Night Phone: _____
 Address: _____ City: _____ Zip: _____
 Certification or Training Completed: _____ Expiration Date: _____

****Lifeguard (if applicable):** _____ Day Phone: _____ Night Phone: _____
 Address: _____ City: _____ Zip: _____
 Certification: _____ Expiration Date: _____

I have read and will follow the *Safety-Wise* Guidelines applicable to this event/activity.

Signature: _____ **Date:** _____

Contact your local Girl Scout Service Center with questions or for current insurance guidelines IF one or both of the following apply: ♦ Transportation by other than parents. ♦ Participants are non-Girl Scout members.

Please mail or fax this form to one of the following addresses (your nearest Service Center):

Girl Scouts of Greater Iowa, Attention: Regional Director

526 Third St. Council Bluffs, IA 51503 Fax: 712-328-1304	10715 Hickman Road Des Moines, IA 50322 Fax: 515-278-5988	112 S. 3 rd St. Fort Dodge, IA 50501 Fax: 515-573-4778	601 S. Illinois Ave. Mason City, IA 50401 Fax: 641-423-8387	1515 Zenith Dr. Sioux City, IA 51103 Fax: 712-255-9850
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