

Parent Permission Form

Troop #: _____ Leader's Name: _____

Leader's Phone: _____

Activity: _____

Activity Date: _____ Activity Location: _____

We will leave from: _____ at _____ a.m. p.m.

We will return to: _____ at _____ a.m. p.m.

Cost: \$ _____ Return permission slip and payment by: _____

Girls should wear: Uniform Troop T-shirt Other: _____

Girls should bring: _____

Equipment needed: _____

Troop Emergency Contact (an adult not attending the event)

Name: _____ Phone: _____

Drivers/Chaperones needed: _____

Keep upper portion. Return bottom portion to your troop leader by _____.

Girl Scouts Heart of Michigan Parent Permission Form

My girl _____ has my permission to go to _____.

She is in good physical condition at present. I will make sure that she does not attend if she is ill.

I understand the cost will be \$ _____.

During this activity, I can be reached at: _____.

Please list the names and phone numbers of two other responsible adults to call if we are unable to reach you in case of an emergency or delay. Please notify these contacts that you have listed them.

Name #1: _____ Phone: _____

Name #2: _____ Phone: _____

Girl Scouts Heart of Michigan has my permission to secure emergency medical care for my girl while participating in this activity.

Signed (Parent or Guardian): _____ Date: _____

I am willing to drive and

I have (#) _____ seat belts and/or child seats, as required, available in the back seat of my vehicle.

I have provided the troop leader a signed copy of the Driver's Guidelines and Driver and Privately Owned Vehicle Statements and current proof of insurance.

I am willing to chaperone this trip.

My girl is not attending this trip. (Please initial _____ and return.)