



Girl Scouts Heart of Michigan

Outdoor Program Facility Rental Form

Reservations are processed on the first business day of each month, six months prior to rental date. Please refer to the *The Source* for facility descriptions and fees.

Office Use Only

DS: _____

DE: _____

RN: _____

CS: _____

Name of group leader: _____

Street address: _____

City, State, ZIP: _____

County: _____

Daytime phone: (____) _____ Evening phone: (____) _____

E-mail: _____

(By providing your e-mail address, your program confirmation packet will be sent electronically.)

Troop # _____ Troop leader (if different): _____

Troop level: Daisy Brownie Junior Cadette Senior Ambassador

of girls: _____ # of adults: _____ # of non-Girl Scouts: _____

Name of person who is GS troop camp trained: _____

Certifying council: _____ Date certified: _____

Name of First Aider (with current first aid and CPR): _____

Certifying agency: _____ Date certified: _____

(To use GSHOM facilities, please attach a copy of the required training/certification cards.)

Choice 1

Camp: _____ Site/facility: _____

Arrival date/day: _____ Departure date/day: _____

Choice 2

Camp: _____ Site/Facility: _____

Arrival date/day: _____ Departure date/day: _____

Does anyone in your group have any special needs we should be aware of for accommodations? _____

If yes, please explain: _____

Payment enclosed:

GS Cookie Incentives \$ _____

Check/M.O. (payable to GSHOM) \$ _____

Cash (walk-in registration only) \$ _____

Credit card (indicate total) \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

FOR CREDIT CARD PAYMENT, COMPLETE THE FOLLOWING:

Exp. Date ____/____/____

Visa MasterCard Discover

Card # _____ - _____ - _____ - _____

Name on account: _____

Signature: _____

Check-in starts at 5 p.m. and checkout is at 3 p.m.

Troop arrival time: _____

Troop departure time: _____

Applications must be received by the 5 p.m. on the first business day of the month to be included in initial placement. A lottery for multiple requests for a site will be drawn by noon on the second business day of each month. Applications received after this time will be placed on a first come first served basis.

All girls and adults participating in camping or events at GSHOM camps should be registered as a member of GSUSA.

Disclaimer:

I have read, understand and agree to comply with the registration guidelines and procedures as outlined on our Web site at www.GSHOM.org.

Group leader's signature: _____ Date: _____