girl scouts
heart of michigan

# Adult Member Registration

Check one: ○ **New Member** ○ **Reregistering** ○ **Lifetime** **GSUSA ID** *(if known)* _____

## CONTACT INFORMATION

**Title or salutation:** ○ Ms. ○ Mrs. ○ Miss ○ Mr. ○ Dr. Other_____

Name: First Middle Last

Address Apt

City State Zip Code

_(____)_____ _(____)_____
Home Phone Cell Phone

_(____)_____
Work Phone E-Mail Address

Employer Title/Occupation

## DEMOGRAPHICS

Girl Scouts respects and welcomes people from all backgrounds and abilities. By completing the following optional question, you can help ensure community support and funding for Girl Scouts in your community. This information is used for statistical purposes only. Thank you for providing the information requested.

**I am:** *(check all that apply)*
○ American Indian or Alaskan Native ○ Asian ○ Black or African American
○ Hawaiian or Pacific Islander ○ White ○ Other (please specify)_____

**I am Hispanic or Latino/a:** ○ Yes ○ No

**Gender:** ○ Female ○ Male **Age range:** ○ 18-29 ○30-49 ○50 and up **DOB:** *(mm/dd/yy)* ___/___/____

**Highest level** *(check one)* ○ Some High School ○ High School ○ Some College
○ Associate's ○ Bachelor's ○ Postgraduate

**Number of years in Girl Scouting as a:** ○ Girl_____ ○ Volunteer_____

## PARTICIPATION

**How will you be participating in Girl Scouting?** *(check all that apply)*
○ Volunteer - *I volunteer for the Girl Scouts* ○ Community Partner
○ Parent/Family - *my family member is participating in Girl Scouts* ○ Staff – *I am employed by Girl Scouts*
○ Girl Scout Alumnae – *I was a Girl Scout in my youth* ○ Other _____

**If you checked volunteer above, please select the role(s) you will be serving in:**
○ 01 Group/Troop Advisor/Leader – *for the following group(s)/troop(s)* #_____ #_____ #_____
○ 02 Assistant Group/Troop Advisor/Leader - *for the following group(s)/troop(s)* #_____ #_____ #_____
○ 03 Group/Troop Support Volunteer - *for the following group(s)/troop(s)* #_____ #_____ #_____
○ 11 Area Team/Area Volunteer – *for the following Service Area(s)* SA_____ SA_____ SA_____
○ 12 Learning Facilitator/Trainer
○ Other (specify)_____

## ACCEPTANCE

I accept and agree to abide by the Girl Scout Law.

Signature Date

*When participating in Girl Scout activities, I may be photographed for print, videotaped, or electronically imaged. Images may be used in promotional materials, news releases, and other published formats for Girl Scouts Heart of Michigan or Girl Scouts of the USA. The images will be the sole property of either the local Girl Scout council or Girl Scouts of the USA.

## LIFETIME

**Become a Lifetime Member!** *(Includes a permanent Membership Card and Recognition Certificate)*
○ I wish to register as a Lifetime Member for a one-time fee of $300. I am 18 years of age or older *(high school graduate or equivalent)*
○ I wish to register as a Lifetime Member for a one-time fee of $156. I am currently registered as an Ambassador Girl Scout who will be graduating from high school *(or equivalent)* in this membership year in the month of _____. **(Must submit by September 1st, 2013 )**

## PAYMENT\DONATION

**YES!** I would like to make a Family Partnership donation that directly benefits girls in our area. Enclosed is my tax-deductible donation of :
○ $250 ○ $100 (100th Anniversary Level) ○ $50 ○ $25 (Patch Level) ○ Other $_____

***Thank you for your support of Girl Scouts!*** (Please see attached Family Partnership information.)

**MEMBERSHIP IN GIRL SCOUTS OF THE USA (GSUSA) and Girl Scouts Heart of Michigan (GSHOM):**
○ Cash ○ Check *(payable to Girl Scouts)* ○ Visa ○ MasterCard ○ Discover ○ Cookie Cash ○ Other_____

Name on Credit Card _____
Credit Card# _____
Exp. Date _____
Signature _____Date_____

**GSUSA/GSHOM Dues $20**_____
**Lifetime Dues $**_____
**Donation $**_____
**Total $**_____

**Return your registration with the $20 annual** *(or applicable Lifetime)* **GSUSA/GSHOM membership dues to your local GSHOM regional center.**

Membership dues are not refundable or transferable to another person.

**Mem. Year through 9/30/ 2013**

**I am interested in:**

Participating with girls directly-
○ Camp
○ Events
○ Series
○ Travel
○ Troop
○ Virtual

Getting involved behind the scenes-
○ Administrative
○ Council Committees
○ Learning Facilitator
○ Fund Development

**Five Regional Centers to Serve You!**

**Ann Arbor Regional Center**
1900 Manchester Road
Ann Arbor, MI 48104

**Jackson Regional Center**
4403 Francis Street
Jackson, MI 49203

**Kalamazoo Regional Center**
601 West Maple Street
Kalamazoo, MI 49008

**Lansing Regional Center**
1223 Turner Street
Suite 200
Lansing, MI 48906

**Saginaw Regional Center**
5470 Davis Road
Saginaw, MI 48604

**(800) 497-2688**

**www.GSHOM.org**

For Volunteer or Office Use Only:
(check if applicable)
○ VS Category #1
○ VS Category #2
Council Code: 456
Group/Troop _____
Serv. Area/Team _____