



Troop Activity and Quick Trip Approval

Please complete for all activities that are outside of your normal meeting place, time and date. This includes day trips, overnights of one to two nights in length, and council sponsored events. Submit completed form to your Community Volunteer Support Coordinator, Community Adult Learning Coordinator or Troop Pathway Coordinator. If there is no volunteer in one of these positions or if leader is the Coordinator, please submit completed form to your GSGWM Staff Troop Pathway Manager. Unapproved activities are not covered by Girl Scout liability or activity insurance.

If this trip involves adults providing transportation for only their own daughters, you need to fill out the front of this form. If adults will be providing group transportation, please fill out both the front and back of this form.

Troop/Group # _____ Community # or Name _____

Troop Leader/Group Advisor (contact) _____

Complete address _____

Daytime phone () _____ Evening phone () _____

Current Program Age Level: Daisy Brownie Junior Cadette Senior Ambassador

1. Planned destination/activity: _____

2. Planned travel dates:
 Day trip Date/Time _____

Overnight: From _____ to _____ # of nights _____

3. Anticipated number of registered: girls _____ adults: female _____ male _____

4. Anticipated number of non-registered: girls _____ adults: female _____ male _____

(Supplemental insurance is required for any attendees not currently registered as Girl Scout members. The cost is nominal and is paid by the troop through the council. Please contact the Manager, Troop Pathway to purchase)

5. Purpose of trip/activity: _____

6. Related Journey: _____

6. Activity information: List any specialized activities in which you expect to participate: (swimming, horseback riding, etc.)

7. Planned accommodations during travel and at destination:

- Not applicable (day trip) Hotel/motel Personal home
 Group living, no outdoor cooking Camping and/or outdoor cooking

8. Have you read Safety Activity Checkpoints that pertain to all anticipated activities? Yes No

9. What leader training is required for this activity? _____

10. Have you, or another adult attending, completed the required training for this activity? Yes No

If yes, who _____

11. What girl planning occurred in preparation for this activity? _____

12. Are you planning to do additional fundraisers for this activity? Yes No

13. Are there any agreements or contracts being required for this activity or travel? Yes No

(Attach copies of agreements) Note: the council CEO must sign all rental agreements and contracts.

14. Have you requested a Certificate of Insurance for this site, or confirmed the council has one on file? Yes No

15. Emergency contact: _____ Phone number () _____

16. Certified First Aider: _____ Phone number () _____

This form must be given to the appropriate person at least 3 weeks prior to the activity to start the approval process. Upon receipt, they will contact you with questions to complete the process or with approval for the activity to take place. Approval must be received within 24 hours of trip.

Transportation Plans

17. Drivers for this event: Names	License # and state of issue	Expiration
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

18. Do all drivers have proof of liability insurance? Yes No

19. Have all drivers completed the GSGWM volunteer process and background check as outlined in GSGWM Volunteer Policies & Procedures? Yes No

19. If appropriate, are there enough child/booster seats for all girls according to state laws? Yes No

20. Are there enough seatbelts for all girls and adults? Yes No

21. Have you read the transportation policies as outlined in *GSGWM Volunteer Policies & Procedures* pages 5-9? Yes No

22. All travel rental agreements, including those for sites and/or vehicles, are valid only when signed by the Girl Scouts of the Green and White Mountains CEO and must be submitted six weeks in advance. Have all rental agreements been submitted to the CEO? Yes No N/A

23. Do you have an emergency plan that you will cover with drivers and girls? (Route, emergency procedures in case of accident/car trouble, road map (in vehicle), required rest stops, and Emergency Procedures Card.) Yes No

Approval signature

Date Submitted

Date Approved