



Troop/Group & Juliette Money-Earning Request

Girl Scouts of the Green and White Mountains
 1 Commerce Drive
 Bedford, NH 03110-6835
 888-474-9686
 girlscoutsgwm.org

Please check:

- 1st money-earning activity
- 2nd or more money-earning activity

Note: the Report Form from prior activities must be submitted before approval can be given.

TROOP/GROUP & JULIETTE MONEY-EARNING REQUEST

Please submit 4 weeks before money-earner takes place to your Community Accounting Coordinator.
 If you do not have a CAC, please submit to GSGWM at customer care@girlscoutsgwm.org.

Town where troop/group or Juliette meets: _____
 Date: _____ Troop/Group #: _____ Age Level: _____ # Girls: _____
 Leader/Advisor: _____ Phone #: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Money-Earning Activity (specify where, when, and how girls are providing a good or service):

Date Planned: _____ Dollars Expected: \$ _____
 Purpose for Money-Earning (trip, activity, service project): _____

Total Amount Needed: \$ _____

To Be Completed by Troop/Group: Yearly Budget for the Current Membership Year (include actual and/or estimated income)

Income

GSUSA Membership Dues _____
 Balance from Previous Year _____
 Group Dues (girls x weeks x dues) _____
 Fall Product Sale Profit _____
 Cookie Sale Profit _____
 Other Sale Activity (please specify): _____

Expenses

GSUSA Membership Dues _____
 Supplies (glue, paper, etc.) _____
 Equipment (scissors, tents, etc.) _____
 Recognitions (badges, pins, etc.) _____
 Service Projects _____
 Program Events (group camping, events) _____
 Other Expense (please specify): _____

TOTAL INCOME \$ _____

TOTAL EXPENSES \$ _____



Parent/Guardian Permission for Troop Money-Earning

Service Unit # _____ Troop/Group # _____ Grade level _____

Leader/Advisor's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Date of Event: _____ Time: _____

Location of Event: _____

Type of money-earning project (include how the goods or service will be provided): _____

Purpose of Money Earning: _____

Money-earning project approved by: _____ Date: _____

Girl Scout's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

My Girl Scout _____ has my permission to participate in the above money-earning project. In doing so, I agree to accept financial responsibility for all products and/or money she receives and will also see that she has adult guidance at all times.

Parent/Guardian: _____ Date: _____

Girl Scout's Signature: _____ Date: _____

Supplemental Money- Earning Activities

GOAL: That all money-earning activities should be an experience that gives girls the opportunity to develop self-confidence and to practice and develop skills in goal-setting, budgeting, marketing, and customer relations.

All funds that are raised by Girl Scouts will be held in an approved Troop/Group Bank Account, managed by troop volunteers, or in the Individually Registered Girl (IRG) Account, held by GSGWM.

The Girl Scout Cookie Sale and Fall Product Sale are the primary money-earning activities in which girls can participate. If additional funds are needed to participate in programs, the following guidelines must be met:

- Troops/Groups, Juliettes or Service Units must submit a Troop/Group & Juliette Money-Earning Permission form at least four (4) weeks prior to the activity to the appropriate Community Accounting Coordinator.
- Any additional requests must be submitted through the Community Accounting Coordinator to GSGWM at least four (4) weeks prior to the money-earning activity.
- Money-earning activities will not be approved unless the troop/group or Juliette has participated in the council-sponsored cookie sale.
- Money-earning activities must be approved in advance in order to ensure coverage by the Girl Scout liability and accident insurance.
- Money-earning activities need to be age appropriate, suited to the abilities of the girls, and be consistent with the goals and standards of Girl Scouting as presented in *Safety Activity Checkpoints* and the *Blue Book of Basic Documents*.
- Money-earners require the girls to provide a good or service to receive money. The following suggestions of appropriate money-earning activities are offered as a guideline. It should not be construed as an all-inclusivist, nor does selecting an activity from this list guarantee approval:
 - Car washes
 - Garage/yard sales
 - Holiday gift wrapping
 - Collect and redeem recyclable materials
 - Babysitting at a town meeting, school meeting, or other public places
 - Homemade craft/bake sale
 - Conduct a class for younger children in crafts, puppets, woodworking, bike repair
 - Approved program activities such as badge workshop
 - Raking leaves, shoveling snow, weeding gardens
 - Birthday party or delivery service
 - A play, dance, fashion/talent show, costume party, karaoke night
 - Suppers, lunches, breakfasts, teas, etc.
- **The following activities would not be approved:**
 - Raise or solicit money for other organizations while acting in the capacity of a Girl Scout.
 - Raffles, games of chance or drawings
 - Direct solicitation of money (donation jars/buckets)
 - Product demonstration parties or sale of any commercial product
 - Restaurant (or other business coupon) with a percentage gain
 - Any 'a-thon': bike, walk, rock
 - Crowdfunding (GoFundMe or other program/sites)
- Money-earning activities may not be conducted on the Internet.
- Group money-earning activities may not be held during the published sale dates of council-sponsored sales. Each year the dates will vary. This year's dates for the Fall Product Program are October 1-October 26, 2025, and the Cookie Program dates are January 1, 2026 -March 15, 2026
- The purpose and cost of money-earning activities must be made known to the girls and their parents/guardians. Parents must sign a Parental/Guardian Permission for Money-Earning Activities form before their daughter's participation in any money-earning activity.



Money-Earning Report Form

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Please submit within *two weeks after activity* to your Community Accounting Coordinator. If you do not have a CAC, please submit to GSGWM at customer care@girlscoutsgwm.org.

Please check:

- 1st money-earning activity
- 2nd or more activity

Troop/Group #, or Juliette: _____ Age Level: _____

Leader/Advisor: _____

Describe your money-earning activity:

Date held: _____ Location: _____

Number of Girl Scouts participating: _____ Number of Girl Scouts in troop/group: _____

Dollars expected: \$ _____ Dollars raised: \$ _____

What would you tell other troops who want to do a similar money earning project?

What are your plans if amount raised did not meet your expectations?

Girl Scouts' Signatures of Troop/Group Members and date:

Leader/Advisor's Signature: _____ Date: _____