

# REGISTRATION FORM – GCSI 2011 SUMMER ACTIVITIES

*All participants must be registered Girl Scouts.*

*If not currently registered, girls wanting to take part in the summer activities may register as Girl Scouts (\$12.00 membership fee) at the Girl Scout Service Center.*

**PLEASE PRINT CLEARLY!**

Name of Girl: \_\_\_\_\_ Troop # \_\_\_\_\_

Mailing address: \_\_\_\_\_ T-shirt size \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Email: \_\_\_\_\_

Just finished grade: \_\_\_\_\_ School: \_\_\_\_\_ or Home school \_\_\_\_\_

Emergency Contact (in case parent/guardian cannot be reached): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Dietary restrictions, allergies, or any other information we should be aware of \_\_\_\_\_

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**\$60.00 per week per girl**

**\_\_\_\_\_ Brownie Camp – July 18–22, 2011 (no camp on the 21<sup>st</sup>)**  
**Open to all girls entering 2nd grade through entering 4th grade.**

**\_\_\_\_\_ Junior Camp – July 25–29, 2011**  
**Open to all girls entering 4th grade through entering 6th grade.**

**Limited financial aid is available**

I give my daughter permission to participate in the summer activity(ies) listed above. I give my permission for my daughter to be photographed during the activities and for those photographs to be used for publicity purposes by Guam Girl Scouts and Girl Scouts of the USA.

**REFUND POLICY: There is no refund for no-show.** Payment will be refunded 100% if cancellation is received by the Guam Girl Scout Service Center at least 10 days prior to the start of camp.

\_\_\_\_\_  
Parent or Guardian (PLEASE SIGN AND PRINT NAME) Date

I authorize the following people to pick up my daughter from day camp (PLEASE PRINT):

Name	Phone	Relationship to Child
_____	_____	_____
_____	_____	_____
_____	_____	_____

*\*Please do not send someone (other than those listed) to pick up your child without notifying us*

For office use only: Payment Method: Cash \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card \_\_\_\_\_ Date: \_\_\_\_\_ Staff: \_\_\_\_\_