

## INDIVIDUAL GIRL PROGRAM EVENT REGISTRATION

Girl Scouts of Greater Los Angeles P:(626)677-2334 • www.girlscoutsLA.org

- Hardcopyregistration form can be submitted to the Montclair Service Center to Emailed to <a href="mailto:mzimmon@girlscoutsla.org">mzimmon@girlscoutsla.org</a>.
- Be suretoreadeventregistrationdetailsbeforeregistering. Please print clearly with blue/black in kortype. Forms cannot be transferred from one event to the next.
- **Incomplete registration forms will not be processed. One** registration form must be completed for each event.
- Full payment must accompany registration form unless deposit option listed in event details.
- Pre-registration is necessary to ensure adequate materials are available.
- Nowalk-inswillbeaccepted. All cancellations are subject to a 10% administration fee. No refunds will be given after the close of registration. 0
- Registrationforalleventswillcloseondatelistedineventdetails,orsoonerifeventfillsbeforeregistrationdeadline.
- Onlygirlscurrentlyingradelistedineventdetailsmayattendevent.Someeventsmayrequireanadulttoattendwithindividualparticipants,checkeventdetails.

PARTICIPANTINFO						
			Last			
	Grade School			Date of Birth (DD/MM/YY)		
	Parent/ Guardian			E-mail Address		
	MailingAddress			Apartment Number		
	City		Stato	State Zip Code		
				vening Phone/Pager		
				nergency Contact Phone		
	Name of Adult attending with girl (see event details for requirements)  • Yes, I will help Council use resources wisely and receive my confirmation viae-mail				mationviae-mail	
	Accommodations needed, if any (accessibility, medical, dietary, interpreter, etc.)					
EVENT						
	EventName					
	FEES Participants #Attending	xFee/person =Totalf	fee	TOTALFEE		
	Girl	=\$		(unless deposit option listed in details)		
	Adult	= =\$		\$		
	TOTAL	=\$		Ψ		
AGREEMENT	Ihavereadtheprogramdetailsandgivemychildpermissiontoparticipateintheactivitylistedabove. Iunderstandthat Iamresponsible for arranging transportation to and from eventlocation, unless a transportation option is listed in event details. I understandthat in case of emergency, every effort will be made to contact a parent/guardian prior to medical treatment. If the parent/guardian cannot be reached, however, and the situation requires immediate emergency attention as determined by the Girl Scout representatives, I hereby authorize representative of Girls couts of Greater Los Angeles to obtain necessary treatment for my daughter. • O Yes O No liquive permission for photographs, vides, audio recording, and quotations of my childtaken by authorized Girl Scouts of Greater Los Angeles staffor their designee to be used for council publications, television, or the World Wide Web. • O Yes O No					
	SignatureofParent/Guardian			Date		
MEMBERSHIP	o IamcurrentlyamemberofGSGLATroop#					
	o lamcurrentlyamemberofanothercouncil(name)					
	o IwouldliketojoinasanindividualmemberofGirlScoutswiththisregistrationandhaveincluded\$15 forGSUSAmembershipdues.					
PAYMENTINFO	Name on Credit Card					
	O \$Check (payableto Girl Scouts)	CreditCard#		ExpirationDate (MM/YY)		
	O \$CreditCard VISA,MasterCard,Discover,AmEx	editCard  SA, MasterCard, Discover, AmEx  Yoursignatureabovesignifi youragreementtoallow GirlScouts of GreaterLos Angeles to charge the above amount to your credit card. You agree to pay this amount pursuant to the agreement you have with your credit card provider.				
E	FAX 909-624-7928	HAND DELIVERY		MAILTO:		

- Must pay with Credit Card
- · GSGLA cannot confirm receipt of FAX
- Do not mail original form once fax is sent

Registrations must be dropped off at the Montclair Service Center or faxed to 909-624-7928 Michele Zimmon GSGLA Montclair Service Center 9525 Monte Vista Ave.