Frequently Asked Questions

Q: What is the keepsake for this event?

A: Each Mall Madness **Winter Wonderland** registered participant (girls and adults) will receive a custom keepsake scarf.

Q: Will there be a patch? How do I get my troop patches?

A: Yes. One fun patch will be included for every registered attendee. Patches will be distributed by troop as you enter the event Saturday night.

Q: What will the girls be doing?

A: There will be a variety of activities set up throughout the mall. Troops are encouraged to be innovative and apply to host an activity booth. Please review the packet for more information.

Q: Will the stores and food retailers stay open?

A: Some stores and food retailers will be open for a few hours during the night. Stores and hours are subject to change without notification.

Q: Is food included?

A: Yes, snacks and dinner are included for all registered attendees. The caterer has not been finalized but a vegetarian option will be provided. If you have a known food allergy or require special dietary accommodations, please notify RuthAnn Thompson (rthompson@girlscoutsla.org) immediately.

Q: My daughter has a friend that wants to go but she isn't a Girl Scout, can she go?

A: Yes, please have the friend register through eBiz as a non-Girl Scout. She will then need to be added to your roster and pay the \$47 non-Girl Scout fee for this event.

Q: I want to volunteer that night, but my troop isn't going, can I do that?

A: Yes, please contact RuthAnn Thompson (rthompson@girlscoutsla.org) for more information.

Q: Are men allowed to attend?

A: Yes. There is a separate sleeping area and a designated restroom for men only. Just like all other adult volunteers, men must clear a background screening and be a registered member to attend.

Q: How many adults can go per group and what will the adults be doing?

A: Adults count towards capacity and we'd like to have as many girls as possible attend the event. Safety wise ratio is to be followed. All attending adults must work a 2 hour shift during the event. Adults will receive an email with an iVolunteer link in order to sign up for a service shift once we are closer to the event date.

Q: Do all adults attending need to be background checked?

A: Yes, every adult who would like to attend any Girl Scout overnight event must first submit a volunteer application and background screening request. Background screening results can take 7-10 days to return, so please make sure to register for the event, even if you haven't received your clearance. Spots cannot be held and <u>late registration will not be allowed</u> even if you've cleared the background screening.

Q: When is check-in and how do I get my troop wristbands, lanyards and scarf?

A: Wristbands, lanyards and scarves will be distributed by troop (not individually) the night of the event at the check-in table starting promptly at 9 pm. **One leader per troop** should report to the check-in table to avoid overcrowding.

Q: What time do doors open and close?

A: Doors open at 10 pm, activities begin at 10:30 pm. Your troop may opt to line up earlier, but please stand or sit safely on the sidewalk and try not to block the sidewalk for mall patrons. Troops may leave the mall as early as 4 am, but all troops and their belongings must be out of the mall by 5 am. Troops cannot arrive early and set up their area in the mall prior to 10pm.

Q: How do I make changes to my registration?

A: To make changes to an existing registration please email our Registration Department at registrationdepartment@girlscoutsla.org. Please keep in mind that girl spaces can be changed ONLY with other girls NOT adults. Add-ons are allowed only if availability allows. **No refunds after March 24, 2016**. Cancellations subject to 10% administrative fee.

Q: How can I get there?

A: Troops must coordinate transportation. If you are interested in bussing from a service center, please email RuthAnn Thompson (rthompson@girlscoutsla.org). Bussing availability will be dependent on member interest and is not guaranteed.



Adult volunteer information:

- All adults attending this event are required to work one 2 hour shift during the event. This event is safe and successful because of everyone's support.
- All adults must be registered Girl Scouts, have a volunteer application on file and must have cleared a background screening prior to the event.
- At least one adult from each troop must be <u>Indoor Overnight trained</u> AND <u>First Aid/CPR certified</u>. Check out the training schedule on the GSGLA website.
- Male volunteers are allowed and will have a designated restroom and sleeping area near the first aid station.
- Troops are required to complete the parent permission form and submit it to their Service Unit Manager for approval prior to the event.



Where to park and enter: Park in the parking structure in front of Verizon. Display the Parking Pass that will be provided. Please line up as a troop, stay on the sidewalk and not on the road. Please do not block mall patrons pathways. We will enter on ground level by Verizon.

What to bring: LESS IS MORE! THE MORE YOU BRING, THE MORE YOU HAVE TO CARRY/HOLD WHILE IN LINE.

Girls: Blankets, sleeping bags, pillows, refillable water bottle, slippers (slippers can only be worn in the sleeping area). Closed toed shoes must be worn while walking around the mall. Some stores will be open for shopping. A list of participating retailers will be sent closer to the event. **Retail participation is subject to change without notice.** Girls may bring spending money. Girls are responsible for their own belongings and money. Cameras and cell phones are allowed but the troop leader has the final say as to whether a girl can bring them. **Please label all valuables with girls names.**

Adults: Foldable chair, reusable coffee cup, reusable water bottle and a positive attitude.

Troops: Retailers and mall management prohibit tape of any kind on walls, windows or pillars. We cannot affix anything to any mall surface. If your troop chooses to bring a troop poster, please make sure it's no bigger than poster size and is free standing. Signs are used to designate your troop sleeping area. **NO GLITTER ALLOWED ON THE SIGNS and NO TAPE OF ANY KIND ON ANY MALL SURFACE.**

What to wear:

Wear your GS appropriate winter wonderland gear and show us your style! Wear what inspires you! Pajamas are ok, shirts that cover shoulders and the midsection. Open toe shoes are not allowed. Comfort is key! Girl Scout dress code is enforced. We love to see the adults dress up as well! Troops may opt to dress alike!

Where am I sleeping?

Sleep? There's none of that going on! Please be mindful to not spread out excessively wide. Only go out as long as a sleeping bag length. Please do not set up chairs/blankets in the aisles or walkways as this creates a fire hazard and your items will be moved. Please post your troop freestanding signs above your area.

Does an adult need to shadow the troop all night?

Not unless you want to. Mall doors are locked and monitored by adult volunteers and mall security. Please coordinate periodic check in times with your troop for safety. Please reinforce with your troop that this is a Girl Scout event and to please act, speak and treat others and property with respect.

PLEASE BE ADVISED: This event will be photographed and/or videotaped for use by GSGLA & Montclair Plaza. If you do not wish to be photographed or videotaped, this may not be the event for you.

If you have any other questions feel free to email RuthAnn Thompson (rthompson@girlscoutsla.org).

What's going on at Mall Madness Winter Wonderland?

A schedule of events and activities will be emailed out closer to the event as activities, vendors and entertainers are confirmed.

If you have specific questions, please email RuthAnn Thompson (rthompson@girlscoutsla.org).

What to turn in before the event:

	Mall Madne	ss Winter	Wonderland Cover Sheet
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- □ Troop Roster information
- □ Copy of your troops signed Permission Form with Service Unit Manager signature. One copy per troop, please.
- ☐ Heath History Forms for every girl in attendance (please keep a copy on hand).
- □ [OPTIONAL] Troop led booth activity application

All required forms MUST BE RECEIVED AT COUNCIL <u>no later than</u>

<u>March 23, 2016</u>. You can send in your troop packets earlier but please DON'T MISS THIS DEADLINE!

Completed troop packets must be dropped off at your local service center marked clearly for **RUTHANN THOMPSON /Mall Madness/Woodland Hills Center** or mailed directly to:

GSGLA Woodland Hills Service Center Attn: RUTHANN THOMPSON / Mall Madness 209310 BURBANK Blvd., Suit A Woodland Hills, CA 91367

<u>Please note:</u> Troop packets will not be accepted via fax or email. Please drop-off or mail your completed troop packet as soon as possible!



Service Project

Family Foothills Shelter Donation Box

Every troop is asked to participate in the service project. In past years we have collected a truck full of food, toys, shoes for those in need.

Be a sister to a child in need. Create your own Donation Box for a child in transition when they arrive to a new facility or shelter. They can be for girls or boys of all ages! We are hoping to collect at least 200 boxes.

So, what goes in a Donation Box?

Here are the principal items that every box should have:

- One pad of drawing paper, one blank journal, or one coloring book (ideally a combination)
- At least one type of art supply (markers, colored pencils, crayons, etc)
- At least two non-perishable snacks (store bought pre-packaged individual servings of crackers, cookies, fruit snacks, granola bars)
- Toothbrush & toothpaste
- Flashlight with batteries (inexpensive at Harbor Freight or Wal-mart)
- Nightlight (perfect for a child to keep near them as they adjust to a new room in a new home)

In addition, you may also include:

- Toys (dolls, balls, small cars, etc)
- Stuffed animals
- Puzzles
- Blankets
- Water bottles
- Sunglasses
- Stickers
- Playing cards
- Games

Each box will also come with a note, so if you have something you would like to say, we will include your note with a box. No last names please.

Keep in mind that foster kids have no possessions when they enter a facility so the more you include in your donation box the more special it will be!

Cover Sheet:

(please include with your paperwork)

Leader must complete this form:

Troop number:	
How many girls registered to attend with troop?	
How many adults* registered to attend with troop?* *All adults must have a volunteer application on file, pass a background screening, and be registered for this event. One adult per group must be indoor overnight trained and FA/CPR certified event only one Girl Scout.	
Leader Name:	
Address:	
City:	
Zip Code:	
Phone number:	
Email:	
 □ Mall Madness	r signature
<u>Please note:</u> If you are dropping off your completed troop pactories other then Woodland Hills, please be ask the Customer Caryour packet to: RuthAnn Thompson/Mall Madness, Woodland Hills	e Specialist to send

Keepsake Scarves

TROOP #:		
Adult contact:		
Email Address:		
Please indicate	ate total Scarves for reg	istered participants:
Our t	troop needs	scarves!

Submit this page with troop packet no later than March 24, 2016.

Do not send money. Scarves are included in registration.

Troop Roster Information

Troop number:	
Leader Name:	



	Girl's Name:		Girl's Name:
1		13	
2		14	
3		15	
4		16	
5		17	
6		18	
7		19	
8		20	
9		21	
10		22	
11		23	
12		24	

	Adult Names [Please indicate who is overnight trained with a (*), indicate FA/CPR certification with a (+)]	Reg	gis			unteer app on file (V) heck cleared (B)	Cell number
1			F	R	V	7 В	
2			F	R	V	7 □ В	
3			F	R	V	7 □ В	
4			F	R	V	7 □ B	



HEALTH HISTORY & AUTOMOBILE INFORMATION

2015-2016

This form must be completed by parent(s) of each registering Girl Scout (please print).

Girl's	s Name: First	Middle			Last	
Date	e of Birth	Group/Troop #				
Mot	her/Guardian Name		Sign	nature		
Addi	ress	C	ty		State	Zip Code
Tele	phone		Cell Pho	ne	1 A	
Fath	er/Guardian Name		Sign	nature	7	\
Addi	ress	Ci	ty		State	Zip Code
Tele	phone		Cell Pho	ne		
Non-	-Parent Emergency Contact Name					
Tele	phone		Cell Pho	ne		
		Girl Healt	h History Inform	mation		
Med	lical Insurance Carrier		Po	licy #		
Is yo	our daughter's immunization record up-to-da	ate?	Date of last	tetanus shot:		
	ck all that apply:	□ Nosebleeds	☐ Sleep Distr		☐ Fainting	☐ Bed Wetting
25	☐ Contact Lenses	□ ADD/ADHD	☐ Emotional	Disturbances	Other	
	ase list any allergies (penicillin, food, etc.):					
	ase list any additional medical/physical/emot blems, medications, etc.):	ional condition of which	the leader shou	ıld be aware (i.	e. chronic condition, d	isabilities, behavioral
	NOTE: All medication must be	in original container, w	ith girl's name, o	losage and fre	quency clearly printed	on the label.
		Autom	obile Informat	ion		
than	person being transported in a private vehicl n the minimum amount of vehicle liability ins type of vehicle being driven.					
	I have and will maintain current automobile	insurance coverage as	required by law	and can provid	e proof upon request.	
	I/we hereby give permission for our Girl Sco vehicle that has at least minimum liability in					river, in an emergency, in a
		Council	Policies and Pr	ocedures		(V.B), (**), (**), (**), (**), (**)
	The undersigned do hereby authorize the o anesthetic, medical or surgical treatment an of a physician or surgeon licensed under the surgical diagnosis or treatment and hospita further understood that permission is herel such medical aid or assistance as might, in to of Greater Los Angeles, its officers, leaders surgical procedures performed pursuant to	nd hospital care to be re e provisions of the Med I care rendered to said by granted to the office their judgment, be requ and agents will not be h	endered to said n ical Practice Act, minor by a denti rs, leaders or age ired for the imm reld liable for any	or to consent to or to consent to st licensed und ents of Girl Sco ediate care of to first aid treats	e general or special sup to any x-ray examination or the provisions of the uts of Greater Los Ango your daughter. In the e ment or hospital care r	pervision and upon the advice on, anesthetic, dental or e Dental Practice Act. It is eles to obtain and administer event of such help, Girl Scouts
	If you do not consent to the care or treatm					
	Signature of Parent/0	Suardian		Date		



HISTORIAL MEDICO & INFORMACION DE AUTOMOVIL

2015-2016

Esta forma debe de ser completada por los padres para cada niña que se inscribe (por favor escriba en letra de molde).

Nombre de niña: Primero	Segundo	A	pellido	
Fecha de nacimiento	# de Tropa/Grupo			
Nombre de madre/tutor		Firme		
Dirección	Ciudad		Estado	Código Postal
() Teléfono		Teléfono de celular		
Nombre de padre/tutor		Firme	1	
Dirección	Ciudad	-	Estado	Código Postal
() Teléfono		Teléfono de celular		
reletions		Telefolio de Celular		
Contacto de emergencia "que no sea Padre":				
Teléfono		Teléfono de celular		
	Historial Med	ico de la Niña		
Infromación de seguro medioc, Compañía		# de Poliza		
¿El registro de vacunas de su hija esta al dia?	□ Sí □ No Fect	na de la ultima Cacuna contra	el Tétanus:	
Indique lo que aplica:	☐ Desangramiento de la r	nariz Disturbios del Sue	ño 🗆 Desmayos	☐ Orinarse en la cama
□ Lentes de Contacto	☐ ADD/ADHD	☐ Disturbios Emocio		La Offinarse effica canno
Indique cualquier Alergia: (i.e. penicilina, comida,	etc.):			
Por favor indique cualquier otra condicion medic	The second secon	al el adulto encargado necesit	e estar enterado (i.e.co	ondicion cronica,
discapacidades, problemas de comportamiento,				
TOME NOTA: Todo medicamento debe de estar e	n su envase original, con el non	nbre completo de la niña, la dosi	s y la frequencia clarame	nte escrita en la etiqueta.
	Información I	De Automovil		
Cualquier persona que sea transportada en un ve				
minimo de cobertura de seguro que requiere el E que esta manejando.	stado de California. El chofe	r debe de ser un adulto con u	na licencia de conducir	valida para el vehiculo
☐ Tengo y mentendre seguro de automovil po	or la cantidad requerida por le	ey y puedo presentar compro	bante cuando se me pi	ida.
☐ Yo/nosotros, por medio de la presente, auto	rizamos a nuestra hija a viaja	r en un vehículo conducido p	or una persona adulta,	o con un menor de edad,
en caso de emergencia, con licencia de cond		ga una póliza de seguro, por la	a cantidad mínima requ	erida por la ley del
Estado de California, para toda las actividade	CONTRACTOR OF THE PARTY OF THE	Imlantas Dal Canallia		
☐ Los abajo firmantes, autorizamos a los funci		limientos Del Concilio Girl Scouts of Greater Los And	eeles nara dar consenti	miento a cualquier
examen de rayos-X, anestesia, tratamiento r				
especializada y bajo el consejo de un medic				
examen de rayos-X, anestesia, tratamiento o				
las provisiones del Acta de Practica Dental Greater Los Angeles de obtener y adminstra				
hija. En el evento de tal ayuda a, Girl Scouts				
cualquier tratamiento de primeros auxilios o este consentimiento. Este consentimiento s			edimiento quirúrgico re	ealizado de acuerdo a
☐ Si no autoriza cuidado o tratamiento como			ite o no permite y firm	e abajo:
Firma de Padre/Tutor	p-1101=1100=1100	Fecha		

Troop-led Activity Booths

Dear Troops—

Would you like to play a starring role in *Mall Madness Winter Wonderland* by hosting a booth on our Walk of Fame? We will register <u>2 girls and 2 adults to the event for FREE</u> for your commitment! Earn leadership hours and have fun by creating and implementing a booth for your Girl Scout sisters to enjoy.

There are limited booths available. Juniors and Older Girls can apply. Please apply early.

Step 1: Get together with your troop and discuss an activity you can facilitate and teach others.

Step 2: Fill out and return the application by mail/fax/email no later than March 24, 2016.

Step 3: Troops will be notified by April 1, 2016 if their booth is selected.

The booth can be related to this year's theme, *Winter Wonderland*, by or it can be related to badge requirements. You can facilitate crafts, games, help with a service project, and much more! The key is MAKE IT FUN! Please note that you cannot charge a fee for your activity or craft. We will supply the materials you need for your activity.

What troop must provide:

- Girl staff to lead the activity
- Adults to supervise your booth
 (NOTE: booth must be staffed 11 pm 4 am)
- Activity for approximately 1000-1200 girls
- Supply List (turn into RuthAnn Thompson)
- Signage for your booth

What the event will provide:

- Tables/chairs
- Extra adults (if requested)
- Supplies up to \$300



The activities at the booth should be interactive and take about 10 minutes for the girls to complete. **Troop booths must be staffed from 10:30pm - 4am**.

Thank you so much for your interest in being a star on our Walk of Fame and hosting a troop booth at *Mall Madness Winter Wonderland*

If you have any questions please don't hesitate to email RuthAnn Thompson (rthompson@girlscoutsla.org).

Turn in Booth Application by March 24, 2016!

By Mail: GSGLA / Woodland Hills Service Center

Attn: RuthAnn Thompson/Mall Madness

20931 Burbank Blvd., Suite A Woodland Hills, CA 91367

By Email: rthompson@girlscoutsla.org

1roop #:				
Program Level (Circle One):			
	Junior C	adette Senior	Ambassador	
Leader Name:				
Address:			_City:	A AL REST
Zip Code:	Daytime: (<u>)</u>	Evenir	ng: <u>(</u>)	
Email Address: _				
Number of girls pa	articipating+	Number of adults p		
(use Safety-Wise ratio)			= Total	
Have you register	ed on eBiz already?	Yes No		
Name of Booth/s	s):			
	(circle the one that best fits,			
	Badge Requiremen		Snacks	Team building
Games	Dauge Nequiremen	its Claits	Ollacks	ream building
Is this badge or j	journey related? If so	, please list badg	e/journey:	
Estimated time t	o complete activity: _			

Troop Booth Questionnaire

Dia	First force to the collection of about 16 consideration
Please answer all questions thoroughly.	Feel free to use additional sheets if needed.

1.	Timeline: What is your preparation schedule? For example: When will you have your signs painted, girls scheduled, who will be in charge of what, and what are your deadlines?
2.	Please describe your activity:
3.	How many girls need to be at the booth activity at a time? How many adults? How will you arrange breaks? (Please remember booth needs to be staffed and active from 10:30pm—4am)
4.	Will this activity cost money to do? Does your troop have the funds to cover the difference if you go over \$300?
5.	What materials are needed - tables, crayons, etc.?
6.	Will this be a take home activity/craft or one that they do at the booth and it stays there?
7.	Draw a diagram of the booth area/set-up. Show where girls will approach the booth and where members of your troop will be standing, etc. (For your booth you will be given a 10' x 10' space) How many tables/chairs will you need?
If y	you have any questions or concerns please email RuthAnn Thompson (rthompson@girlscoutsla.org).

Troop Booth Activity Worksheet

Use this sheet to list any supplies you need to purchase. If you can use Oriental Trading for supplies GSGLA can get a great discount! However, feel free to list alternate vendors.

Troops are not authorized to purchase any items until your activity is approved. RuthAnn Thompson/ GSGLA will purchase supplies for you up to \$300.

Supplies	Store/website	Name & item #	Cost per unit	How many girls will 1 package serve?

Total estimated cost for booth activity:	
--	--



GSGLA PARENT/CAREGIVER PERMISSION FORM

Date:

www.girlscoutsLA.org EMERGENCY: (877) 423-4752 This form is REQUIRED for EVERY activity or trip, for EACH girl, whether parents/caregivers attend or not.

1. Please refer to What I Need For My Girls to Attend A... for more information 2. For Extended Overnights (3+ nights) or High Risk Activities - Also fill out the Extended Travel and/or High Risk Application for GSGLA approval TOP portion is for parent/caregiver information to keep. BOTTOM portion to be returned signed to Leader. Regular Troop/Group Meetings (One form yearly, list or attach dates) – for meetings at the regular day and time but at a different location, only advance written notification to parents/caregivers is required. Day Trips – other than regular meeting day or time, send Permission Form to SUM/Designee at least 2 weeks prior. ■ Short Overnight Trips – (1-2 nights) SUM/Designee approval required prior to sending Permission Form to parents High Risk - (See Safety Activity Checkpoints) SUM, Go-Team, GSGLA approval required Extended Overnight Trips – (3+ nights) SUM, Go-Team, GSGLA approval required Product Sale Boothing (One form yearly, list or attach dates) Activity Information ____ Activity Description: _____ State: _____ Zip: ___ Transportation to Destination: Walk Parent/Caregiver Private Vehicle Troop Carpooling Other _____Time: _____ Pick up Location: ______ Time: ____ Drop Off Location: _____ Troop/Group Pays: _____ Family Pays: ____ Purpose of Fee: ____ Troop Information Required Level(s): D B J C S A Service Unit: ___ Leader/Adult in charge: Second Leader/Adult in charge: ____ Phone: Off Site Emergency Contact Person: Phone: Certification Expiration Date: ___ Name of First Aider: _____ (Valid certification in First Aid/CPR/AED trained Adult attending) Special Training or Certification needed for this activity □ N/A □Name of Indoor Overnight Trained adult attending: ______Training Date: _____ □ N/A □Name of Camping Skills Trained adult attending: _______Training Date: _____ □ N/A □Name of Domestic Travel Trained adult attending: _______Training Date: _____ □ N/A □Name of International Travel Trained adult attending: ______ _____Training Date: _____ N/A Name of Private Certified Lifeguard: ______ Certificate Exp.: ____ Using Lifeguard(s) on site N/A Name of Other Certified Specialist: Certificate Exp.: Using Specialist(s) on site Type of other Specialist: □ N/A □A contract agreement is needed and required by site for this activity and has been submitted to coi@girlscoutsla.org ■ N/A ■Non-member Insurance obtained ☐ I have reviewed Girl Scout procedures for this activity and agree to comply with GSGLA Volunteer Essentials and Safety Activity Checkpoints, and have completed required training/online modules. Leader or Adult signature in charge during activity: Overnight Approval for this activity SUM/Designee signature Date: Parent/Caregiver, please complete, sign and return only this bottom portion to Leader Activity Description _____ _____ Date: __ has my permission to participate with this troop/group in the above activity on this date and time. During the activity, I can be reached by phone at: If I cannot be reached contact: My daughter cannot participate in: _____ ■ My daughter is in good health. If she has a known complicating medical problem or has had an operation, serious illness, or convulsive disorder since her last health examination, I understand that written permission from a doctor must accompany this form for my daughter to participate in water sports, horseback riding, skiing, hiking, sports, and other physically demanding activities. I have discussed appropriate behavior with my daughter. Also, I will make sure she does not participate if not feeling well.

Parent/Caregiver Signature: