

**INDIVIDUAL / FAMILY TRIP  
PARENT PERMISSION**

My Troop No: \_\_\_\_\_ My Leader: \_\_\_\_\_ Phone No: \_\_\_\_\_

Permission for my participation in (activity) \_\_\_\_\_

At \_\_\_\_\_ on Date(s): \_\_\_\_\_ Cost: \_\_\_\_\_

Departure Time and Place: \_\_\_\_\_ Returning Time and Place: \_\_\_\_\_

Personal or Group Equipment: \_\_\_\_\_

In case of emergency, the Event Coordinator will contact you. Phone No. \_\_\_\_\_

Troop Leader or Event Coordinator: \_\_\_\_\_

Certified First Aider: \_\_\_\_\_ not needed for this activity \_\_\_\_\_ provided at the event

Name of First Aider attending: \_\_\_\_\_ Certification expiration checked \_\_\_\_\_

----- (Cut here and retain top portion. Return bottom portion to Troop Leader) -----

Our daughter \_\_\_\_\_ Troop No. \_\_\_\_\_

has our permission to participate in the Girl Scout activity \_\_\_\_\_

On date(s) \_\_\_\_\_ at time \_\_\_\_\_ at (location) \_\_\_\_\_

Adult(s) accompanying my daughter will be (if required by leader to meet Safety Wise Standards):  
\_\_\_\_\_

In case of emergency, we can be reached by phone at: \_\_\_\_\_

Address: \_\_\_\_\_

Additional Emergency Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_ Relationship to girl \_\_\_\_\_

Girl Scout Safety Rules in effect for this activity:

- Buddy system – no girl shall go anywhere without a buddy (adult or another girl)
- No alcohol or smoking is permitted
- Seat belts must be utilized for all passengers in every vehicle
- Every car must have directions to the location of the event
- Every car must have a first aid kit
- If you are a driver please make certain you have a current driver’s license, insurance, and the car is in good repair.

Additional information or special needs for this trip: \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_