Girl Scouts
Girl Scouts of Northern California with offices in: Chico, Eureka, Fairfield, Oakland, Red Bluff, Redding, San Jose, Santa Rosa, Ukiah & Yreka
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Trip & High-Risk Activity Notification and Approval Form

This form is recommended as a planning tool but is not required for:

- Service Unit activities
- Council sponsored activities in the *Choices* catalog
- Activities where girls walk or ride their own bicycles as part of their regularly scheduled meetings
- Trips that are located within one hour driving time or 60 miles from the regular meeting place, and are less than 6 hours in duration, and are not high-risk

For *all trips* you should always make sure your troop/group emergency contact person has updated information about the trip, girls and drivers

This form must be completed and filed with service units for the following trips and high-risk activities:

☐ **Trip farther than one hour driving time or longer than 6 hours in duration but not high-risk**	**File with service unit at least 2 weeks prior to the activity and give a copy to troop/group emergency contact person**
☐ **Trip longer than two nights or involving air travel** ☐ **High-risk activity**	**File with service unit at least 4 weeks prior to the activity and give a copy to troop/group emergency contact person**
☐ **International Trip**	**File with service unit at least one year prior to the trip and give a copy to troop/group emergency contact person**

Leader Name _____ Phone # _____ E-mail address _____

Address _____ Troop # _____ ☐D ☐B ☐J ☐C ☐S ☐A (Troop Grade Level)

City/State/Zip _____ Service Unit _____

About the Trip:

Date & Time _____

Destination _____

Mode of Transportation _____

# of Girls _____ # of Adults _____ # of non-members (unregistered adults or children) _____

Briefly Describe Activities:

_____

Budget: (Cost of transportation, food, event fee, lodging, etc.) Complete this section ONLY for activities which cost over $50 per girl or for trips longer than 2 nights

Total cost $ _____ Per girl cost $ _____

Money-Earning Activities (please describe) Approved?

_____ ☐ Yes ☐ No

_____ ☐ Yes ☐ No

Amount earned $_____

Balance secured through:

_____

Check forms that have been completed:

(NOTE: not all of these may be required for your trip/activity)

- ☐ Annual Permission Forms
- ☐ Parent Permission Forms
- ☐ Girl Health History Forms
- ☐ Adult Health History Forms
- ☐ Non-member insurance
- ☐ Extended trip insurance
- ☐ Behavior contracts
- ☐ Rental Agreements
- ☐ Contract with Facility/Vendor
- ☐ Other: _____

Check procedures which have been followed:

- ☐ A copy of the troop/group roster has been provided to the troop/group emergency contact person
- ☐ The name of the troop/group emergency contact person has been provided to the service unit
- ☐ All trip adults are aware of the emergency procedures and have council emergency contact information

Special Requirements:

First Aider Required? ☐ Yes ☐ No

If yes, name of Certified First Aider _____

Date of certificate expiration _____

☐ Other special adult training or certification needed (Troop Camping Certification, lifeguards, etc)? If so, please provide name, certification information and training dates (use reverse of form if needed)

_____

Emergency Contact Information:

At Home Emergency Contact Name _____

Phone # _____ E-mail _____

GSNC 09/2008

Trip Planning Information: GSNC recommends that all troop leaders maintain current driver information and girl rosters on an ongoing basis. Girl rosters and driver information must be provided to service units as part of the approval process for trips and high risk activities requiring service unit or council approval.

Roster:
Please attach a troop/group roster and indicate which girls and adults will attend.
Include:
- Girl names with parents' phone numbers during the trip
- Adult names and indicate role of each adult attending (leader, chaperone, first aider, driver, etc.)
- Emergency contacts for all girls and adults attending

Note: File this Trip & High-Risk Notification and Approval Form by due date even if attendance roster is not yet finalized. Notify service unit of any changes in the roster later, if necessary.

Driver Information:
Please list names of all drivers, expiration date of driver's license, and expiration date on proof of insurance card.

Driver's Names:	Drivers' License Expiration Dates:	Drivers' Insurance Expiration Dates:

For Service Unit Use Only
Approved By:

Service Unit Trip Coordinator/Team Member

CDD Name

For Council Office Use Only

Received

Approved By

Confirmation