



Girl Scouts of Cahaba Council

MONEY-EARNING PROJECT APPLICATION

To be completed and submitted for approval at least 3 weeks prior to any money-earning activity.

Troop Information:

Troop Number _____ Service Area _____

Program Age Level: Brownie Junior Cadette Senior

Leader's Name _____

Address _____
City *State* *Zip*

Did your troop participate in last year's Council-sponsored Cookie Sale? Yes No

Are you planning to participate in next year's Cookie Sale? Yes No

Money-Earning Activity Information:

Describe your proposed Money-Earning Project: _____

Describe how your troop plans to use the funds earned from this project: _____

Proposed date(s) of Money-Earning Project: _____

How much money do you intend to raise with this project? _____

Has Parent Permission been secured for this project? Yes No

Troop Finance Information:

How much money does the troop currently have? _____

List bank account information (name of bank and account number): _____

Does your troop have a current Troop or Volunteer Bank Account Information on file with the Council office? Yes No

Were girls involved in developing the troop's budget? Yes No

Please note the following when submitting your Money-Earning Project Application:

- Requests for money-earning projects will not be approved during the local United Way campaign or during order taking/delivery dates of the Council's Cookie Sale without special permission from the Chief Executive Officer.
- Make sure to review **Program Standards for Money-Earning/Group Financing** in *Safety-Wise*.
- Do not proceed with plans for this or any money-earning activity until you have secured approval from the Council.

*I have reviewed **Program Standards for Money-Earning/Group Financing** in *Safety-Wise* and agree to follow these guidelines and the Council's policies regarding money-earning activities. I agree to follow all safety and health guidelines applicable to this activity and make this application on behalf of the troop listed within.*

Signature of Leader or Person Responsible for Project

Date

Submit your completed application to:
Girl Scouts of Cahaba Council
Money Earning Projects
105 Heatherbrooke Park Drive
Birmingham, AL 35242
Or Fax to: (205)980-4753

Following review, a copy of your application will be returned to you and one will be sent to your Service Area Manager.

Action Taken:			
Application Approved?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date: _____
If application is not approved, reason: _____			

Council Staff Signature _____		Title _____	