

## Girl Scouts of Eastern Pennsylvania Troop Trip Application

Any gathering that is outside your regular meeting place and time is considered a trip and should be approved accordingly (Service unit events and cookie booths are exempt from this requirement). Submit to your service unit two weeks prior to trip. Refer to the Troop Trip Requirements or the GSEP Trip Guide for information regarding what requirements must be met for this trip.

Section 1-Trip Activity Information				Day Trip		Overnight Trip			
Today's Date		Troop No.:		Service Ur		nit:			
Trip Leader Na	ame:				•				
Phone:		Email:							
Number of	Participants								
Daisy Brownie Junior		Junior	Ca	dette S	Senior	Ambassador			
Names of Clea	red and Registered A	dults:							
Non-Members: Adults Children									
Certificatio	ons and Training	(as required)							
Name	Certification/Trainir	ng Date Taken		Emerge	ency Contact Information				
	First Aid/CPR		At	Home Emergenc	y Contact:	Phone Number:			
	Indoor Overnight Skills					0 11 70			
	Outdoor Skills		Tr	ip Leader:		Cell Phone:			
	Other								
		Section 2–Trip	Act	tivity Informa	ation				
Trip Destination	on:								
Trip Departure Date:				Trip Return Date:					
						ivity Checkpoints for sheets as necessary.			
Day 1:									
Day 2:									
Day 3:									
Are there high	risk activities on thi	s trip? Yes		No					
If yes, then		Have high risk activities been reviewed with parents?							
		COI(s) on file or submitted?							
Additional Insurance purcha				quired by Safety	Activity Ch	neckpoints.			

Section 3-Transpo	ortation	Section 4-Lodgin	Section 4-Lodging (Overnight Only)		
Type of Transportation	on planned:	<b>Lodging:</b> Please list the name and address of where you will be staying. Must provide separate sleeping quarters and restrooms for males on trip.			
Certificate of Insurance on file	of submitted.	and restrooms for mates on	trip.		
Plane		Night 1:	COI on file?		
Airline and flight No.			Yes No		
Boat		7	Not Required		
Certificate of Insurance on file	of submitted.		•		
Train					
Car		Night 2:	COI on file?		
Van (10 passenger or less)			Yes No		
Van (12 passenger with CDL D	river)		Not Required		
Volunteer Driver Form on file.		_	1		
Section 5-Mo	ney	Nicolat 2a (C. 12)			
Trip Cost:		Night 3: (holiday weekend or summer months only)	COI on file? Yes		
Troop Contribution	Total \$	7	No		
Family Contribution	Total \$	7	Not Required		
Total cost of trip	\$	7			
	Section 6	-Trip Approval			
Trip Leader Stateme	ent of Complian	<b>ce:</b> Verify that all statement	s below are true.		
GSUSA and GSEP health, s	afety, and emergend	cy procedures have been review	red and are being followed.		
GSUSA and GSEP health, s	afety, and emergend	cy procedures have been review	red and are being followed.		
Families are informed of th	e costs associated v	vith this trip and what costs the	ey are responsible for.		
Appropriate permissions (in each girl and will be carried		ory forms and permission slips or First Aider at all times.	) have been obtained for		

Service Unit Manager/Trip Advisor Signature:

Trip Leader Signature:

All adult chaparones are registered and cleared per GSEP policy.

Our group will conduct ourselves as a positive representative of Girl Scouts.

All adult participants are able to perform in their capacities according to GSUSA health and safety guidelines.

(Typed names may act in place of signatures)

Date:

Date: