



PARENT/GUARDIAN PERMISSION FORM FOR TROOP OUTINGS/TRIPS

Please complete this form and return to _____ . Permission(s) and release information is needed before your daughter can participate in Girl Scout troop outings/trips. Please print legibly.

Girl's Name _____	Troop # _____
Address _____	City/St/Zip _____
Parent/Guardian Name _____	Phone # _____
Parent/Guardian Name _____	Phone # _____
Emergency Contact Name _____	Phone # _____

(Someone other than the parent/guardian who we can contact in an emergency)

Permission for Outings

This permission is required for all troop outings/trips. My daughter has my permission to participate in any troop sanctioned or Girl Scouts of North-Central Alabama approved trip, event, and activities during the 20__-20__ membership year. I understand I will receive information giving specific departure and arrival times, planned activities, contact person and any other pertinent information prior to any trip/event.

Illness or Injury Agreement

Should my daughter become ill or injured while on an outing or trip and cannot continue to participate, I agree to provide, at my expense, a sitter for the remainder of the outing/trip **or** transportation back home from the outing/trip.

Authorization for Treatment

I also hereby give permission to the Girl Scout adult in charge to order X-rays, routine tests, treatment to release any records necessary for insurance purposes; and to provide and arrange any necessary related transportation (at the parent/guardian's cost) for my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Girl Scout adult in charge to secure and administer treatment, including hospitalization, for the person named above.

Photo Release

I **do** ___/ **do not** ___ give permission for any pictures of my daughter taken during the outing/trip to be shared with GSNCA for use in publications, donor presentations and GSNCA social media.

Signature of Parent/Guardian

Date