

Preliminary Extended Trip Application

Submit three months in advance of an extended trip to troopsupport@girlscoutsoaz.org. This application should be used for all overnight trips that are more than two consecutive nights. All adult volunteers on the trip must have a current membership and background check.

Troop/Group Information			
troop / group #	levels <input type="checkbox"/> daisy <input type="checkbox"/> brownie <input type="checkbox"/> junior <input type="checkbox"/> cadette <input type="checkbox"/> senior <input type="checkbox"/> ambassador		
leader's name	phone, day	phone, evening	
leader's address	city	st	zip
trip/activity leader	phone, day	phone, evening	
trip leader's address	city	st	zip

Activity		
We request permission for the following activity (describe the activity in detail):		
activity address	phone	nearest community
from (date) (time)	to (date) (time)	
participants' names (or attach a roster)		
# girls participating	# adults participating	first aider's name
<input type="checkbox"/> Attending adult has Troop Camp Certification 1 (required for all overnights)		<input type="checkbox"/> Attending adult has Troop Camp Certification 2 (required for all camping trips with outdoor cooking/fires and tent camping)

Emergency Contact (required)			
In case of emergency, the troop will notify the following person who will be available by phone during the trip and who will have a list of names, addresses, and phone numbers of those attending. This contact is not on the trip; it will be someone local.			
name	phone, day	phone, evening	
address	city	st	zip

Transportation		
We will be traveling by <input type="checkbox"/> private cars <input type="checkbox"/> rental vehicles <input type="checkbox"/> bus		
# vehicles	describe	company

Additional Checklist for High Risk Activity

ALL ACTIVITIES

- First aid kit provided
- Insurance forms
- Medical history for each participating girl

BOATING

- Flotation device for each person

HAY RIDE

- Vehicle meets safety requirements
- Used on private property

HIKING

- Activity meets safety requirements

HORSEBACK RIDING

- Council-approved stable
- Protective head gear with safety harness per rider
- Boots / shoes with heel
- Certified instructors
- Council horseback riding release form signed per rider
- Activity meets Safety Activity Checklist standards

SKATING

- Activity meets Safety-Wise standard

SWIMMING

- Flotation device for each person
- Certified lifeguard

OTHER HIGH RISK ACTIVITY: _____

- Activity meets Safety Activity Checklist standard

Certification

- I certify that the above information is correct. I have reviewed Safety Activity Checkpoints and the Volunteer Resource Guide standards and will be responsible to see that all participating girls and adults meet the requirements.

signature

date

For Office Use Only

- Preliminary request approved Preliminary request denied

date

staff signature

position