



Monmouth Council of Girl Scouts, Inc.  
242 Adelpia Rd., PO Box 511  
Farmingdale, NJ 07727

Troop/ Group # \_\_\_\_\_ is planning a \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

Mode of Transportation: \_\_\_\_\_

Departure Time/Place \_\_\_\_\_

Leader in charge \_\_\_\_\_ Phone No. \_\_\_\_\_  
(will accompany girls)

**EACH GIRL WILL NEED**

**Expenses** \_\_\_\_\_

**Equipment/clothing** \_\_\_\_\_

**IN CASE OF EMERGENCY: The Leader in charge will notify the following, who will immediately notify parents**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

***TEAR OFF BOTTOM AND RETURN TO TROOP/GROUP LEADER***

My daughter \_\_\_\_\_ has permission to participate in \_\_\_\_\_

She is in good physical condition and has not had any serious illness or operation since her last health exam.  
During the activity I can be reached at:

Address \_\_\_\_\_ Phone No. \_\_\_\_\_

**If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Relationship to participant \_\_\_\_\_ Physician's name \_\_\_\_\_

Physician Phone No. \_\_\_\_\_ Additional Remarks: \_\_\_\_\_

As parent/guardian of the above named child, I hereby consent that any photographs, videotapes, recordings, etc., in which my daughter appears may be used by Monmouth Council of Girl Scouts, Inc., its assignee or successors, in whatever way they may desire, and that these photographs, recordings, etc., shall become their property, which they may use free and clear of any claims on my part whatsoever.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_