



Girl Scouts.

# Girl Scouts—Dakota Horizons

## Trip Activity Permission Form

(Up To 3 Days and 2 Nights \* Including Camping Trips)

For approval submit to Membership Specialist at least 2 weeks prior to trip. Please keep a copy for your records. You will receive an e-mail response requesting additional information and/or approval within one (1) week.

Troop # \_\_\_\_\_ Leader Name \_\_\_\_\_ Grade Level (circle one): D Br Jr Cd Sr Am

Adult TRIP Leader's Name \_\_\_\_\_ Phone (H) \_\_\_\_\_

Address \_\_\_\_\_ Phone (C) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Destination \_\_\_\_\_ Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_

*(Supplementary insurance from your District Office is needed for trips longer than 3 days and 2 nights.)*

Number Attending: Registered Girls \_\_\_\_\_ Registered Adults \_\_\_\_\_ Non-registered Participants \_\_\_\_\_

*Please attach a list of all girl and adult participants including non-registered members.*

Proposed Itinerary: **Please attach trip itinerary or write in space provided on back of form.**

Emergency Contact Person at Home \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

*(This emergency contact should have a list of all participants and their parent/guardian names and emergency phone numbers so they may be kept informed in case an emergency or delay in travel occurs.)*

**List for planning:**

- Safety-Wise** is used for all planning (Refer to Chapter 5: Planning Trips & Travel Tips).
- If leasing or renting a vehicle, rental contract must be authorized by the CEO of Girl Scouts—Dakota Horizons.
- All drivers of vehicles are licensed, at least 18 years of age and are a registered adult Girl Scout volunteer.
- Certificate of insurance on leased or rented vehicle must be sent to your District Office prior to departure date (Bismarck, Fargo, Rapid City or Sioux Falls). **\*\*15 passenger vans are not approved for travel.**
- All girls and adults are registered with GSUSA or have insurance to cover them.
- Trip Coordinator will have signed health/permission cards for all girls.
- Appropriate girl/adult ratios are met.
- Appropriate and safe equipment will be used.
- Location and emergency phone numbers of nearest hospital will be on hand.
- A First Aid kit is available. **1<sup>st</sup> Aider Name** \_\_\_\_\_ **Type of First Aid certificate** \_\_\_\_\_
- A certified lifeguard has been secured for water activities. **Lifeguard Name** \_\_\_\_\_
- Emergency Contact Person has a list of all girls and adults attending along with their emergency phone numbers, Council Emergency Procedures card and the trip itinerary.

**Southeast District**

1101 S. Marion Rd  
Sioux Falls, SD 57106  
Fax 605-336-6841

**Southwest District**

140 North Street  
Rapid City, SD 57701  
Fax 605-343-9508

**Northwest District**

1421 S. 12<sup>th</sup> Street  
Bismarck, ND 58504  
Fax 701-223-7840

**OR** 525 31<sup>st</sup> Ave SW  
Minot, ND 58701  
Fax 701-838-1574

**Northeast District**

1211 Prairie Parkway **OR** 2525 Demers Ave  
West Fargo, ND 58078 Grand Forks, ND 58201  
Fax 701-293-7962 Fax 701-772-6670

**OFFICE USE ONLY**

Trip Approval **HAS** or **HAS NOT** been granted.

Reasons or Comments \_\_\_\_\_

Membership Specialist \_\_\_\_\_ Date \_\_\_\_\_

## **TROOP TRIP ITINERARY**

**Must be attached to *Application for a Trip Overnight Form***

Please list places and dates of trip destinations, departure and arrival times, lodging, forms of transportation and phone numbers where you can be reached during the trip. Parents also need to have a copy of the itinerary and emergency contact information.