

## Event/Learning Registration Form

**Opening date (Sept-Jan events) is August 31, 2009 • Opening date (Feb-Aug events) is January 5, 2010**

Please read *Registration Procedures* in the Program Guide before completing form. Complete a separate form for each event and return with payment, one payment or check per registration form. Registration and payment must be received into Event Registrar office by event registration deadline. Fax your registration with credit card payment information to 701-293-7962, or, mail with payment to Event Registrar office at address noted above.

**Troop #** \_\_\_\_\_ Registering (circle one) Individual Troop Group Program Aide  
**Grade Level (circle one)** Daisy (K-1<sup>st</sup>) Brownie (2<sup>nd</sup>-3<sup>rd</sup>) Junior (4<sup>th</sup>-5<sup>th</sup>)  
 Cadette (6<sup>th</sup>-8<sup>th</sup>) Senior (9<sup>th</sup>-10<sup>th</sup>) Ambassador (11<sup>th</sup>-12<sup>th</sup>)

### ADULT REGISTRATION CONTACT

The adult listed below will receive confirmation, any updated information and is responsible for relaying this information to those registered.

Name \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

### EMERGENCY CONTACT

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### EVENT/LEARNING INFORMATION - Please list names of Girls and Adults registering on back.

Event Name \_\_\_\_\_ Event Date \_\_\_\_\_  
 Event Location \_\_\_\_\_ Event Code \_\_\_\_\_

# Registered Girl Scout(s) \_\_\_\_\_ X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 # Non-Registered Girl(s) \_\_\_\_\_ X \$ **10.00** = \$ \_\_\_\_\_  
 # Adults \_\_\_\_\_ X \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Subtotal \$ \_\_\_\_\_  
 Subtract Attached Dakota Certificates \$ \_\_\_\_\_  
 Subtract Requested Financial Assistance \$ \_\_\_\_\_  
**Amount Due** \$ \_\_\_\_\_  
**Total Enclosed** \$ \_\_\_\_\_  
**Outstanding Balance** \$ \_\_\_\_\_

**Method of Payment**

Troop Check # \_\_\_\_\_  
 Personal Check # \_\_\_\_\_  
 Money Order # \_\_\_\_\_

**Credit Card Payment - Circle One**

Visa     
  Master Card     
  Discover

**For Credit Card payment complete information below.**

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
 Name as shown on card \_\_\_\_\_ 3 Digit Security Code \_\_\_\_\_  
 Amount to Charge \$ \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE TURN OVER AND COMPLETE OTHER SIDE. DUPLICATE FORM AS NEEDED.**

## GIRLS

	Registered to Troop # (5 digit #)	First & Last Name	Address/Phone	Grade
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

## ADULTS

	Registered to Troop # (5 digit #)	First & Last Name	Address/Phone	First Aid/CPR Certified Yes/No
1				
2				
3				
4				
5				

**Special Needs** – please list any special needs (dietary, activity restrictions, etc.) you would like to make event planners aware of before the program.

Name/troop will automatically be placed on a wait list if the event is full. Adult contact will be notified of wait list status and if spots open up. \*Remember to bring **Health History Cards** for each girl attending this event.