

Annual Parent Permission Form for Day Trips

October 1, to September 30,

**Before each trip outside of your normal meeting place or time, Troop/Group Leader agrees to:**

* Notify all parents/guardians
* Request updated emergency contact information

Troop/Group Leader Name Signature Date

**Parents/Guardians:**

Name of Girl Scout Troop/Group #

Date of Birth Grade School

Parent/Guardian Name Home Phone Cell Phone Work Phone

  OK to text

Parent/Guardian Email

Address City/State/Zip

Emergency Contact Home Phone Cell Phone Relationship to Child

**Permission for Trips:** My daughter/dependent has permission to travel to, attend and participate in the following troop/group and council-sponsored activities:

**\_\_\_Yes \_\_\_No** Activities within 1 hour driving time of the meeting place and not exceeding 6 hours in duration.

 **\_\_\_Yes \_\_\_No** All activities, except those considered high-risk\* or involving an overnight stay.

\*High-risk activities and overnight/extended trips require an individual Parent Permission form.

 (Troop Leaders are required to submit a Troop Trip Application to GSHNC for trips involving high risk activities, cruises, or international travel).

**Permission to give Medication:**

**\_\_\_Yes \_\_\_No** I hereby consent for the leadership of this troop to dispense over-the-counter medication and/or prescribed medication as listed here:

**Special Needs:**

**\_\_\_Yes \_\_\_No** Does your daughter/dependent have any dietary, medical, or other special needs?

**If yes, indicate special needs:**

**Permission to Register Daughter/Dependent Online**:

**\_\_\_Yes \_\_\_No** I hereby consent for the leadership of this troop to register my daughter/dependent online for the current membership year.

**Parent Agreement:** I have read and understand this Annual Parent Permission Form. **I will notify the troop/group**

**leader of any changes in emergency contact information.** I may change or revoke any aspect of this agreement at any time by submitting my request, in writing, to the troop/group leader.

Signature of Parent/Guardian Date

Parents/Guardians: Keep a copy of this form for your records and submit to your troop/group leader.

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