



Girl Scouts, Hornets' Nest Council
 7007 Idlewild Road • Charlotte, NC 28212
 704-731-6500, Outside Mecklenburg 800-868-0528
 Website: www.hngirlscouts.org



SERVICE UNIT EVENT PROPOSAL

The Service Unit Manager should submit to Membership Specialist 2-3 months before the event.
ATTACH SCHEDULE OF PLANNED ACTIVITIES & EMERGENCY PROCEDURES PLAN

Service Unit: _____ Date: _____

Name of Event: _____

Event Date: _____ Time: _____

Location: _____ Phone: _____ # at Event: _____

Event Coordinator: _____ Phone: (D) _____ (E) _____

Address: _____ City: _____ State/Zip: _____

Event Registration Deadline: _____ Email: _____

Event Core Committee: (List key volunteers and/or separate activity directors, etc.)

_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of Event First Aider: _____ Phone: _____

Mode of Transportation Used by Participants: _____

Maximum No. Participants: _____ Minimum No. Participants: _____

Will non-registered adults or Tagalongs be attending? _____ Yes _____ No

If yes, have you consulted the Girl Scouts, Hornets' Nest Customer Service Department for additional insurance? _____ Yes _____ No

Additional Resource People:

Brief Description of Event:

Will there be High Risk activities (i.e., water activities, challenge courses, horseback riding)
 ___ Yes ___ No (If yes, who has certification? Explain.)

Collaboration with other organizations/agencies:

Please complete information on the back!

PROPOSED EVENT BUDGET

Site Fee	\$ _____
Activity Fee	\$ _____
Program Supplies/Materials	\$ _____
Transportation	\$ _____
Food and Beverage	\$ _____
First Aid Supplies	\$ _____
Housekeeping	\$ _____
Additional Insurance	\$ _____
Printing	\$ _____
Postage	\$ _____
Miscellaneous (explain)	\$ _____
_____	\$ _____
_____	\$ _____
Projected Expenses	\$ _____
Divided by number of participants equals cost for each participant	\$ _____
If additional income is needed identify sources:	\$ _____

I certify that the information provided is the most current and accurate information available and that all **Safety Activity Checkpoints** and Hornets' Nest Standards, Policies and Procedures have been met. I will advise Girl Scouts, Hornets' Nest Council of any changes.

Event Coordinator

Date

Service Unit Manager's Signature

Date