



Troop Trip Application

This application is for high risk activities and overnight trips except for overnights at a leader's home or sponsorship, Service Unit events, or GSHNC events. In these cases, leaders are to follow procedures for day trips.

- Before completing this application, refer to the Volunteer Essentials manual (<http://www.hngirlscouts.org/handbooks>) and Safety Activity Checkpoints (<http://www.hngirlscouts.org/programs-safety-activity-checkpoints>) for specific emergency procedures and first aid safety guidelines for each activity. Be sure to follow all standards that apply to your trip and any activities you plan.
- Submit this form, a list of all participants attending (girl and adult), and a detailed itinerary at least 1 month in advance to your Service Unit Manager.** If this is an international trip submit this form 1 year in advance. For trips to the Juliette Gordon Low Birthplace, submit this form 6 months in advance. The reservation with the birthplace must be made directly with the birthplace 1 year in advance.
- If you have reserved a GSHNC property, attach a deposit check payable to GSHNC in the amount of \$50 per unit, not to exceed \$200. GSHNC will hold the deposit check until the property keys are returned to the Council Office and upon final property inspection by site ranger. Check will be shredded upon clean inspection.

GENERAL

Troop Leader Name		Troop Number		Service Unit
Troop Leader Street Address		City, State		Zip
Day Phone		Evening Phone		Email Address
# Registered Girls _____ (attending)	Women: # Registered _____ # Not Registered* _____	Men: # Registered _____ # Not Registered* _____	# Tag-a-longs* _____	Total # of Participants _____

TRIP INFORMATION & TRANSPORTATION

Destination		Complete Address		Mileage (one way)
Departure Date:	Departure Time:	Return Date:	Return Time:	

SUPPLEMENTAL INSURANCE FEE SCHEDULE

Supplemental Insurance is required for trips lasting more than 2 consecutive nights (or 3 nights if one is a federal holiday).

***Supplemental Insurance is also required for non-registered adults and tag-a-longs for any Girl Scout activity.** Tag-a-longs are defined as younger siblings, friends, boys, or a registered Girl Scout who is not of the proper age for the activity and is not participating as a service project. For example, a Brownie who goes on a trip with her older sister's Junior troop is considered a tag-a-long and must purchase additional insurance. However, a Cadette assisting with a Daisy troop overnight is covered, since she is performing service.

Send a check to GSHNC, payable to Mutual of Omaha. To calculate the amount, you must count each day of the trip starting with the day of departure and including the day of return. **There is a minimum charge of \$5.**

- Plan 2 – Accident only: Total # of Participants _____ x # of Days _____ x 11 cents = \$ _____
- Plan 3E – Accident and Sickness: Total # of Participants _____ x # of Days _____ x 29 cents = \$ _____
- Plan 3P – Accident and Sickness***: Total # of Participants _____ x # of Days _____ x 70 cents = \$ _____
- Plan 3PI – International Accident and Sickness: Total # of Participants _____ x # of Days _____ x \$1.17 = \$ _____

**Mutual of Omaha serves as the primary insurance.

VEHICLE INSURANCE

Please note: Vehicle insurance is the responsibility of the driver. Neither Girl Scouts, Hornets' Nest Council nor GSUSA is responsible for damages done to vehicles while driven by volunteers.

LEASED OR BORROWED VEHICLE REQUIREMENTS

Read all rental agreements to be sure you comply with their terms and avoid surprises. Note the minimum age of drivers (often 25), as well as the maximum age (often under 70). Be sure the car is adequately insured, knowing who is responsible for damage to or the loss of the vehicle itself.

TRANSPORTATION

The troop/group leader is responsible for ensuring that each driver of motorized private transportation must be at least 21 years old, hold a valid operator's license appropriate to the vehicle, and show proof of liability insurance. State laws must be followed.

- Leader's/Parent's vehicle
- Borrowed vehicle
- Leased vehicle
- Vans
- Chartered Bus
- Train
- Boat
- Plane, Flight #: _____

HEALTH AND SAFETY

Troop First Aider (Adult): Date FA Certification Expires _____ Date CPR Certification Expires _____	Emergency Contact Person (not going on trip): Phone Day: _____ Evening: _____ Cell: _____	Be sure your Emergency Contact Person: <input type="checkbox"/> Has a copy of the complete itinerary <input type="checkbox"/> Has contact information for all parents (Names and phone numbers) <input type="checkbox"/> Knows GSHNC's emergency communication procedures (Daisy card)						
Are any activities of greater risk than usual <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list those activities:	Will there be any water activities (swimming, canoeing, etc)? If yes, please list those activities: <input type="checkbox"/> No <input type="checkbox"/> Yes List lifeguards or other certified individuals as required by Safety Activity Checkpoints : <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Certification Type</th> <th style="text-align: left; border-bottom: 1px solid black;">Expiration Date</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"> </td> <td> </td> <td> </td> </tr> </tbody> </table>		Name	Certification Type	Expiration Date			
Name	Certification Type	Expiration Date						
Are you planning activities such as Ropes Courses, Archery, Bouldering Wall, or Rapelling? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please list those activities here: _____ Names of Facilitators: _____ Date coursework complete: _____								

OUTDOOR LEARNING

Please verify the appropriate courses have been completed by you or the outdoor trained adult for your troop (refer to the Troop Trip Requirements Chart in your FYI Troop Planner or on the website for courses required for specific types of trips).

Course	Name of person with course credit	Date of Course
<input type="checkbox"/> Exploring Outdoors or Be Safe, Be Ready		
<input type="checkbox"/> Troop Camp Preplan/Overnight (prior to June '09)		
<input type="checkbox"/> Fire Building & Outdoor Cooking (after June '09)		
<input type="checkbox"/> The Overnight Camp Experience (after to June '09)		
<input type="checkbox"/> Primitive Camping		
<input type="checkbox"/> Backpack Preplan/Overnight		

I have completed the 3 required courses to be a Girl Scout Leader
 _____ Getting Started or Leader 101 _____ Orientation _____ Age Level/Leadership Essentials
 (Date) (Date) (Date)

I have read the **Volunteer Essentials manual as well as the Safety Activity Checkpoints** that pertain to this trip and have followed the prescribed safety standards in developing this trip. I understand that this trip may not be approved if all trip planning procedures and safety standards have not been met.

Leader Signature _____ Date _____

SERVICE UNIT APPROVAL

_____ Date Received by Service Unit Manager or Learning Coordinator

____ Approved ____ Not Approved, Reason _____

Service Unit Mgr/Learning Coordinator Signature: _____ Date _____

GSHNC APPROVAL

_____ Date Received by Service Center

____ Approved ____ Not Approved, Reason _____

GSHNC Staff Signature: _____ Date _____