



# Application for Troop/Group Camping

Girl Scouts of San Geronio Council  
1751 Plum Lane  
Redlands, CA 92374-4533  
(909) 307-6555 or (800) 400-4475  
[www.gssgc.org](http://www.gssgc.org)

- Complete in duplicate and submit to your Service Unit Manager or Outdoor Consultant\*, **WHO MUST APPROVE, SIGN IT and they keep the duplicate copy.**  
\*submit to Membership Specialist **IF the** Service unit Manager and Outdoor Consultant are not available.
- Send one copy along with Site Reservation, or the Site Information Sheet for Out-of-Council or Non-Girl Scout site, to the Service Center **AT LEAST ONE MONTH** before your trip.

<b>Troop Number</b> (or group name)		All troop members must be currently registered.
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Level(s) and number going									
Daisy*		Brownie		Junior		Cadette		Senior	

\* Daisy Girl Scouts may only camp overnight with family members. See Safety-Wise for Restrictions.

Non-registered adult(s) attending:	#		Other children(s) attending:	#	
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Number of Adults	Service Unit	Trip Begins		Trip Ends	
		Date	Time	Date	Time
Adult in Charge		Day Telephone		Night Telephone	
		(     )		(     )	
Address (Number.& Street)		City		Zip Code	

Campsite:	
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**Please attach a copy of your completed "Site Information" or "Site Reservation" form.**

**Required Training-** We prepared ourselves for this camping trip by recruiting adults with the following training:

**HGGO (Outdoor Camping Training)**

Name	Class Date	Adult Position

**First Aid & CPR:** Copy of current certification **MUST BE ATTACHED.** Troop camping, physically demanding activities, and activities with potential for injury require a person trained in First Aid and CPR.

Name	Telephone	(     )

**TWO Emergency Contacts:** Give each contact a copy of a completed "Parent's Permission for Girl Scout Outing" for each girl, a list of drivers and vehicles, and a list of all individuals attending with home phone numbers.

Name	Telephone	(     )
Name	Telephone	(     )

A "Health History" and "Consent for Treatment" has been completed for each child and given to the Troop Leader:  
 Yes    No

**Required:** Completed "Consent for Treatment" and "Health History" cards must accompany each child. Drivers must have "Emergency Procedure Card" and "Consent for Treatment" for each scout in their vehicle while traveling. The leader in charge shall hold these documents during encampment.

**Mode of Transportation**

# of Private Cars	Other (Describe, including company name)	# Vehicles Staying Onsite

**Insurance**

- ✍ **Non-registered individuals are not covered by Girl Scout insurance.**
- ✍ **Additional coverage for Girl Scout members and non-registered individuals is available at the Girl Scout Service Center in Redlands. Please allow 4-6 weeks for processing.**
- ✍ **All drivers of vehicles must have valid drivers license, registration and current automobile liability insurance.**
- ✍ **In case of an accident in a privately owned vehicle, the owner has primary insurance liability.**

**Activities**

In addition to troop camping, the following activities are planned. Please check all that apply.

Bicycling	<input type="checkbox"/>	Boating	<input type="checkbox"/>	Hiking	<input type="checkbox"/>	Horseback riding*	<input type="checkbox"/>	Extended trip	<input type="checkbox"/>
Other	<input type="checkbox"/>	List:							
Waterfront activities**:	<input type="checkbox"/>	Please List:							
Name of certified lifeguard**									

**\*Must also submit Horseback Riding Approval Form.**

**\*\*We understand that all waterfront activities require adequate adult watchers (see Safety-Wise) and a certified lifeguard, and we have attached a copy of each lifeguard’s certification.**

We have read in “Safety-Wise” the activity checkpoints for: Troop Camping, Cooking and Cleaning, Campfires and Camp stoves and those for all of the activities checked above.

The information on this form is accurate as of: \_\_\_\_\_ (Date)

The council office and your Service Unit Manager or Outdoor Consultant **must** be notified of any subsequent changes.

_____	_____
Signature of Adult in Charge	Date
_____	_____
Service Unit Manager or Outdoor Consultant*	Date
*If neither are available, have signed by Membership Specialist	
_____	_____
Council Approval	Date

**Girl Scout Councils and GSUSA have as a primary goal the development of a membership that reflects the diversity of the U.S. population. In order to monitor our success towards reaching our goal, we ask each troop leader to indicate on this form her/his assessment of the racial/ethnic composition of the troop.**

Registered as	RACIAL					ETHIC			A = Asian AI = American Indian or Alaskan Native B = Black HP = Hawaiian or Pacific Islander W = White H = Also of Hispanic Origin NH = Not Hispanic
	A	AI	B	HP	W	Also H	NH	Total	
Brownie									
Junior									
Cadette									
Senior									
Non-Girl Scout									
Adult									
Total									

