

Girl Scouts of Michigan Shore to Shore Troop/Group Trip Application

Troops/groups planning trips that are more than a 1 hour drive from the meeting place and lasting longer than 8 hours must have prior written approval. All applicable sections of this application must be completed and submitted to the Service Unit Director and the Membership Manager for your area at least **ONE MONTH** in advance. **All Council policies and Safety-Wise standards must be followed for all Girl Scout trips and program activities.**

PLEASE CHECK WHICH TYPE OF TRIP

- Day Trip (more than a 1-hour drive from meeting place and lasting more than 8 hours)
 Overnight Trip
 Travel Camp (trips lasting more than 4 nights AND that have a focus on outdoor activities)—In addition, you must contact the Council for a packet with additional information and guidelines for this type of trip.

A: TROOP/GROUP INFORMATION

Troop # _____ GS Level: DA BR JR CD SR AM Service Unit _____
Troop Leader/Advisor Name _____
Address _____
Street City Zip
Phone # _____ Alt. Phone # (work, cell, etc) _____
E-mail _____
Girls attending trip _____ # Adults attending _____ (list girls & adults on roster section)

B: ESSENTIAL TRIP INFORMATION

Trip Dates: _____ # Days* _____ # Nights* _____
Destination _____
Name of Accommodations/Lodging _____
Type of Lodging: Motel/Hotel School Church Approved Campground
 Private Home Other (describe) _____
 Not an overnight
Address of Accommodations/Lodging: _____
Telephone # at (or nearest) Lodging: _____
Mode of Transportation: Car Bus Train Airplane
 Girls are being dropped off/picked up by parents

If **CAR(s)**, list all drivers below and include a completed Driver Information Form for EACH driver:

Driver # 1 _____ Driver # 2 _____
Driver # 3 _____ Driver # 4 _____

If **renting** a vehicle, please list company name and attach a statement from the company that vehicles have current registration and have basic safety inspections performed prior to rental. **Authorization must be given by the Council prior to renting a vehicle. Copy of rental agreement must be on file at Council prior to trip. Note: Use of 15 passenger vans is strongly discouraged.** Name of rental company _____.

If chartering a **bus**, please attach a statement from the bus company stating that their buses meet minimum state mandated inspections and liability insurance requirements and drivers have current CDL's. **Authorization must be given by the Council prior to chartering a bus Copy of contract, certificate of liability and safety statements must be provided to Council prior to trip for review and approval.**

If using **public transportation**, list company (i.e. Amtrak, Greyhound, American Airlines, etc.): _____

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B: ESSENTIAL TRIP INFORMATION (continued)

Please identify key adult support:

GS Trained troop/group leader(s) attending _____
 Adult currently certified in CPR/First Aid _____
 Adult with current Outdoor Training _____
 Adult with Travel Camp Training (if over 4 nights) _____
 Name of Certified Lifeguard if swimming (must be at least 18 years old) _____
 Emergency Contact Person (should be an adult NOT participating in trip):
 Name _____
 Address: _____
 Phone _____ Alternate phone # _____

Trip Budget:

EXPENSES

FUNDING SOURCES

Food		\$		Portion of expenses paid from Troop Funds		\$
Transportation		\$				
Lodging		\$		Portion of expenses paid by individual girls		\$
Fees (entrance, etc)		\$				
Other (list)				Donations (if any)		\$
		\$				
		\$		Amount paid from other sources (please specify)		
		\$				\$
TOTAL EXPENSES		\$				\$

Trip Itinerary: Please provide a complete trip itinerary, including schedule of arrival and departure times, side trips, rest periods, special activities, etc. Attach a separate sheet if necessary.

Trip Benefit: Please provide a brief statement of how this trip relates to the Girl Scout Program/benefits the girls:

C. CHECKLIST

Please initial each of the following to acknowledge that you have read and understand trip guidelines:

- We have made our trip plans according to *Safety-Wise* and Council Policies
 Special written permission for each girl to attend, including emergency information and permission for medical treatment, will be obtained
 A minimum of two unrelated adults (one of whom must be female), plus additional adults to meet the required adult/girl ratio, will be present during the entire trip.
 A First Aid Kit and emergency forms will be carried throughout the trip (Emergency Procedures, Accident/Incident Report Form, and Insurance Claim Form)
 All girls are currently registered Girl Scouts; adult trip leaders are currently registered Girl Scouts; drivers are encouraged to be registered Girl Scouts
 Additional Activity Insurance Form and premium payment are included if:
 *Any adults attending are not registered Girl Scouts **AND/OR**
 *Trip is more than 2 nights
 Emergency contact person has a complete itinerary, lodging, and participant information about your trip
 A completed Driver Information Form is attached for **each** driver listed on this application.

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DRIVER INFORMATION FORM

Thank you for volunteering to assist in transportation for Girl Scout outings! In order to best ensure the safety of the girls and to assist in locating our troop in the event of an emergency, please complete and sign the form below and return it to the troop leader. We appreciate your cooperation!

Driver's Name: _____

Driver License # _____

Name of Auto Insurance Company: _____

Auto Insurance Policy # _____

Vehicle License Plate # _____

Year, Make, and Model of Vehicle _____

Number of Seatbelts in this vehicle _____

Cell Phone # (if available) _____

Have you had any traffic/moving violation tickets in the last 3 years? _____

If yes, please explain: _____

Have you ever been arrested for driving under the influence of alcohol or drugs? _____

If yes, please explain: _____

Have you ever had your driver license suspended or revoked? _____

If yes, please explain: _____

DRIVER'S AGREEMENT

As a driver for the Girl Scout troop, I agree that:

- I will make sure that the vehicle is in safe operating condition and has sufficient fuel.
- I will make sure that my registration, license and insurance are current and be prepared to show of these.
- I will be sure that everyone is wearing a seat belt at any time the vehicle is in motion.
- I will place no child under 12 in the front seat (to protect from airbags) and children under the age of 8 and under 4'9" will be seated in a booster seat provided by their parent or guardian.
- I will drive within posted speed limits and follow all standard traffic regulations.
- I will alternate drivers when I need a break.
- I will pull over to a stop if I need to place or receive a cell phone call.
- I agree that no tobacco products are permitted in any vehicle transporting Girl Scouts.
Girl Scouts of Michigan Shore to Shore may verify my driving record through the State of Michigan or the state issuing my drivers license.

Signature of Driver

Date