Plan 2

Enrollment Form
for USA Girl Scouts Overseas

Mutual of Omaha

Underwritten by
United of Omaha
Life Insurance Company

GIRL SCOUTS

1. Submit the completed enrollment form through the Director, USAGSO, Girl Scouts of the USA, 420 5th Avenue, New York, NY 10018-2798
2. Enrollment form and premium must be received by Mutual of Omaha prior to 12:01 a.m. of the first day of the Girl Scout international trip.

FROM: Location _____

Address _____

City _____ State _____ ZIP _____

Telephone _____

Fax _____

(Please complete the address portion in full. This will be used to return the Headquarter's verification copy.)

USAGSO approval is required—forms without the appropriate USAGSO signature cannot be processed; group leaders should not submit enrollments directly to Mutual of Omaha companies.

Country and Location Code No. **7** __ __ – __ __ __
8 __ __ – __ __ __

USAGSO name submitting this form _____

Please provide Accident and Sickness Insurance to cover all enrolled participants in the following approved, supervised Girl Scout trip (except statutory employees covered under workers' compensation):

Schedule of Each Event

Name and Location of Event	Beginning Date	Ending Date	(1) Number of Participants	(2) Number of Days	(3) Number of Participant Days (1 x 2)	(4) Premium Each Day @ 11¢	(5) Total (3 x 4)
SAMPLE: JULIETTE LOW CAMP FIRE - Hong Kong	**1/20/XX**	**1/24/XX**	**30**	**5**	**150**	**$0.11**	**$16.50**
1.							
2.							
3.							
4.							
5.							
TOTAL	**N/A**	**N/A**					

Enclosed is a check for the TOTAL PREMIUM shown above, made payable to UNITED OF OMAHA LIFE INSURANCE COMPANY. More than one event may be submitted per enrollment form. MINIMUM PREMIUM is $5.00 per enrollment form.

Director or USA Girl Scouts Overseas Signature _____ Date _____

FOR HOME OFFICE USE ONLY

Verification of Coverage to GSUSA	SGS20
Approved as Submitted _____ /____ / ____ (Signature, Date)	Approved with Change Marked _____/____ / ____ (Signature, Date)

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