

Activity Notification & Insurance Request Form



Are your Girl Scouts going on a trip or participating in a special activity?

Girl Scouting activities outside regular troop meetings are so important in creating a positive Girl Scouting experience! Complete this form and submit to your OCMT to let them know about your exciting plans! Don't fall under an OCMT? Let USAGSO know about your plans by submitting directly to overseascustomercare@girlscouts.org.

If you will be participating in a High Risk Activity needing council approval, need insurance for your trip, or have volunteers needing a background check, please complete this form and submit to <u>overseascustomercare@girlscouts.org</u> at least 2 weeks prior to the activity. You may also submit your request using our online form <u>HERE</u>.

Not sure if you need insurance or are participating in a High Risk Activity? See Sections 3 and 4 for more details. **To be completed by the Troop Leader or Girl Scout Volunteer coordinating the Activity**.

SECTION 1			Activity	/ Trip Inform	ation				
Activity				Destination/Locat	ion				
Describe your activity and it	inerary. /	Addition	al informati	ion about your pla	ns may	also be a	ttached sep	oarately.	
Troop or Activity Leader Name	Тгоор) # (if app	licable)	Troop Level(s) (ch Daisy Bro	eck all tl ownie	hat apply) Junior	Cadette	Senior	Ambassador
Troop or Activity Leader email				Troop or Activity Leader phone				Overseas Community	
# Girls Attending	# Tag-a-	ongs *	# Register attending	red Adults	# Un-r Attend	egistered A ling *	Adults	Total # Par	ticipants
Departure/Start Date & Time	Retur	n/End Da	te & Time	Name of First-Aid	Certified	l Adult atte	nding the trip)	
Please note that the troop/	group lea	der is re	please che sponsible f	of Transportat ck all modes of tra or ensuring that e river's license, and	ansport ach driv	ver of mot	orized priva	ate transpo	ortation must
Personal Vehicles Le	ased vehic	les	Chartered	Bus Train	E	Boat	Plane	Walk	Other
SECTION 2		Rec	uest for	Background C	hecks	3			
If this is an overnight event [•] Volunteer Partners, please li					CMT me	mbers, co	ookie coordi	nators, or	Overseas

RI/1/ L	PERMITTED			
	ERIVITIED ipate in any of the below activities.	Please check the SAC for all	HIGH RISK AC	<u>TIVITIES</u> ouncil approval. Below are just some of the
 Bungee jumpi 				erseascustomercare@girlscouts.org
	tely owned planes,	Backpacking	& Camping	
helicopters, o	r blimps	Hayrides & G		
Hang gliding				& any activity involving weapons
	ot-air ballooning		ter/Large Passenger \	/essels
 Hunting Snowmobiling 	j	Zip liningCross-count	ny skiind	
 Riding a moto 	-		ng and snowboarding	ŝ
 Riding electric 		 Ice fishing 		2
 Using outdoor 	r trampolines	Horseback R	iding	
 Parachuting/s 		Aquatic clim		
Parasailing		Indoor skydi	-	
 Paintball taggi 		Indoor tramp Sould Diving		Caving, Surfing, Swiming
-	ain vehicles (ATVs)			climbing walls, tree climbing, and rapp
Stunt skiingZorbing				w Boating, Standup Paddle boarding, Whitewat
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