**girl scouts** diamonds of arkansas, oklahoma and texas

# Girl Activity Permission Form

The information on this form must accompany the the troop leader(s) (paper or electronic versions) at every event, activity, or trip.

This form must be completed by legal guardians only.

I am submitting this form for the	to	_ Girl Scout year (ex: 2023-2024).
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### **Girl Scout Information**

Full Name:					
Date of Birth:	_ Age:	Phone Number:			
Street Address:	City:		_ State:	Zip:	
Is the girl's contact information the sam	ie as the legal guard	lian? 🗖 Yes	🗖 No		
More information:					

## Legal Guardian Information

Full Name:			
Phone Number:	Email:		
Street Address:	_ City:	State:	Zip:

### **Emergency Contact Information**

Full Name:			
Phone Number:			
Street Address:	City:	State:	Zip:
Troop Information			
Troop Number:	Troop Leader's Name:		
Troop Leader's Email Address:			
Activity or Trip Information			
Date of Activity or Trip:	Location of Activity:		
Return time and Location:			
Description of Activity:			

# Legal Guardians – Please initial in the permission Boxes

	I understand and agree
I understand that I am responsible for ensuring that my child is prepared to participate in this activity as determined by the troop leader. This may include, but is not limited to, payment of fees and attending any preparation meetings. I also understand that I am responsible for ensuring that my child behaves appropriately during this activity. I further understand that, if in the opinion of the leader or adult-in-charge, my child is not behaving appropriately, I may be required to pick-up my child early at my own expense.	
I understand that my child may not participate in this activity if she appears to be ill. I further understand that if my child appears to be ill when she arrives at the activity or become ill during the activity, I will be required to pick-up my child early from the activity at my own expense.	
I will not allow my girl to attend if I do not consider her to be in good physical condition or if she has been exposed to any contagious disease. I know of no reason(s) why my child may not participate in these activities.	
I understand that I am responsible picking up my Girl Scout(s) on time following a Girl Scout program, meeting or activity. If my Girl Scout is not picked up on time, the troop leader or a Girl Scout staff member will attempt to contact me and then the emergency contact listed on this permission form. As a last resort, I understand that the troop leader or staff member may, at their discretions, contact the proper authorities for assistance in locating me.	
COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. As with any social activity, participation in Girl Scouts could present the risk of contracting COVID-19. While Girl Scouts - Diamonds of Arkansas, Oklahoma and Texas (Girl Scouts - Diamonds) takes every safety and preventative precaution, Girl Scouts - Diamonds can in no way warrant that COVID-19 infection will not occur through participation in Girl Scout programs, event, activities, etc.	
I will ensure my troop leader also has a current health history and/or permission form for all Girl Scout participants in my family prior to this activity (see the annual girl and health history or adult health history portion of this form).	
<ul> <li>Health and Safety are top priorities to myself and Girl Scouts - Diamonds of Arkansas, Oklahoma and Texas.</li> <li>I promise to: <ul> <li>Stay safe and help others stay safe.</li> <li>Help when I can.</li> </ul> </li> <li>Be a good health and safety role model for my fellow Girl Scouts. Follow Girl Scouts - Diamonds safety standards and policies, and encourage others to do the same.</li> <li>Never compromise my own safety or the safety of other Girl Scout participants.</li> <li>Actively look for hazards, report them and take action to warn others.</li> <li>Be guided by the Girl Scout law.</li> </ul>	

Mv	child requires	the following :	special accom	modations (	(Enter NA	A for none):
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□ My child is a registered Girl Scout member, and I give her permission to participate in the Girl Scout activity mentioned above.

□ I understand that electronic signatures on this form must be from a secure qualified trust service provider (QTSP), such as DocuSign.

Legal guardian's signature:	Date signed: _	

Full legal name of guardian that signed above: \_\_\_\_\_