

Program Event Registration

Please return this form, along with all applicable fees to your regional office or mail to:
Event Registrations, c/o Event Registrar
 11311 Arcade Drive
 Little Rock, AR 72212

Please complete all sections of this form. **Incomplete forms will not be accepted.** Note event registration deadline to allow sufficient time to reach office. **Late registrations and postmarks will not be accepted.**

I'M REGISTERING MY: TROOP INDIVIDUAL DAUGHTER(S) FAMILY

EVENT NAME EVENT LOCATION

EVENT DATE TROOP # AND LEVEL

CONTACT NAME POSITION: LEADER CO-LEADER PARENT

CONTACT'S PHONE # ALTERNATE PHONE #

ADDRESS CITY/STATE/ZIP

EMAIL

Names of Girl Attendees	Date of Birth	Names of Adult Attendees
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Special Note: If paying with Cookie Bucks, mark the box and spaces below. Additional Cookie Bucks numbers can be listed on back. Be sure to enclose balance not covered by Cookie Bucks.

Cost Calculator

OF GIRLS X EVENT FEES =
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OF ADULTS X EVENT FEES =
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OTHER FEES, IF APPLICABLE
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TOTAL ENCLOSED =
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Special needs and food allergies: Girls Adults

For office use only

RECEIVING OFFICE: DATE RECEIVED:

AMOUNT PAID: RECEIPT NUMBER:

CASH PERSONAL CHECK # TROOP CHECK # COOKIE BUCKS # EXP DATE