

## Caregiver Permission and Responsibility Form

2025 - 2026 Fall Product and Cookie Program

\_\_\_\_\_, a member of troop/group \_\_\_\_\_ has my

The Girl Scout Fall Product and Cookie Program are important to Girl Scouts, their groups and to the Girl Scout councils. These programs provide funds to support activities such as Girl Scout events, trips, camping, and service projects. For councils, the programs provide funds to recruit and train adult volunteers, organize Girl Scout groups, provide councilwide programs such as science and career workshops, and provide financial assistance so all Girl Scouts have access to the opportunities Girl Scouting offers. Through the Girl Scout Product Program, Girl Scouts develop these essential skills and more: goal setting, decision-making, money management, people skills, and business ethics.

## FORM INSTRUCTIONS:

**CAREGIVER AGREEMENT:** 

My Girl Scout, \_\_\_\_\_

Complete this form and return it to the Troop Product Manager (all information is required and must be legible). Caregivers not in good financial standing with Girl Scouts – Diamonds are not eligible to complete this form. Girl Scouts without a completed and signed form may not receive an order card from their Troop Product Manager.

permission to participate in the 2025-2026 Fall responsibility for all products and money they re		Program. In doin	g so, I agree to	accept financial	
AGREEMENT TERMS AND CONDITIONS:  I will see that my Girl Scout does not sell prior to the I will review the safety guidelines with my Girl Scout the latest online guidelines from GSUSA. I understand that once I take possession of any produce I agree that I am signing this form as the legal custod. My Girl Scout has my permission to engage in online the adult supervision of myself and/or the Girl Scout.	for contacting customers lets that I am financially re lian of the Girl Scout. Fall Product and Cookie Volunteer in charge.	s, taking orders, selli	ng, and delivering	all products received.	
By signing here, I agree to the above written te	rms and conditions:				
Signature of Caregiver		Date			
What is your Girl Scout's shirt size? (check  ☐YS ☐ YM ☐ YL ☐ AS  CAREGIVER INFORMATION:	one size) □ AM □ A	L 🗆 AXL	□ A2XL	□ A3XL	
Name of Caregiver	Signature of Caregiver			Date	
Address	City		State	Zip Code	
Telephone	Email	Email			
Birthdate	Place of Em	Place of Employment			
Driver's License # or State Issued ID #	Secondary I	Secondary Email			