

Caregiver Permission and Responsibility Form

2026 – 2027 Fall Product and Cookie Program

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 council-wide 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:

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.

CAREGIVER AGREEMENT:

My Girl Scout, _____, a member of troop/group _____ has my permission to participate in the 2026-2027 Fall Product and Cookie Program. In doing so, I agree to accept financial responsibility for all products and money they receive.

AGREEMENT TERMS AND CONDITIONS:

- I will see that my Girl Scout does not sell prior to the official start date and that they always have adult guidance.
- I will review the safety guidelines with my Girl Scout for contacting customers, taking orders, selling, and delivering products, including the latest online guidelines from GSUSA.
- I understand that once I take possession of any products that I am financially responsible for submitting payment for all products received.
- I agree that I am signing this form as the legal custodian of the Girl Scout.
- My Girl Scout has my permission to engage in online Fall Product and Cookie program activities such as M2OS and Digital Cookie under the adult supervision of myself and/or the Girl Scout Volunteer in charge.

By signing here, I agree to the above written terms and conditions:

Signature of Caregiver

Date

What is your Girl Scout's shirt size? (check one size)

☐YS ☐YM ☐YL ☐AS ☐AM ☐AL ☐AXL ☐A2XL ☐A3XL

CAREGIVER INFORMATION:

Name of Caregiver

Signature of Caregiver

Date

Address

City

State

Zip Code

Telephone

Email

Birthdate

Place of Employment

Driver's License # or State Issued ID #

Secondary Email