Permission Slip For Trips & Activities



As parent/caregiver, I give permission for	to participate
in the trip/activity to	
with her Girl Scout Troop #tha	at is scheduled for
I understand I will be responsible for completing a	any additional activity waivers and remitting additional costs as
indicated by troop leaders.	
Emergency Contact(s):	
Name	Name
Phone	Phone
Relationship	Relationship
My Girl Scout may be released to this contact.	My Girl Scout may be released to this contact.
My Girl Scout may also be released to the fol	llowing people
After this Girl Scout troop activity, my girl w	vill: (Please check one)
O Picked up by	
O Walk home	
Parent/ Caregiver's Signature	Date

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