

Activity & Money Earning Notification

Submit form to your local Membership Staff Member 1 month prior to a money-earning activity.

NOTE: no raffles and games of chance are permitted per GSUSA policy.

Today's Date: _____ Troop #: _____ Service Unit: _____

Date of Activity: _____ Begin Time: _____ End Time: _____

Description of Activity and/or Money Earning: _____

Location of Activity and/or money earning: _____

Person Responsible: _____ Cell Phone of Person Responsible: _____

Is this a Girl Scout only activity or a Tag-a-long/family activity?

- Girl Scout Only Activity
- Tag-a-long/Family Activity (additional insurance required)

Number of girls attending: _____ How are the girls going to be transported: _____

Number of adult attending: _____

Is your SafetyWise number met by adults? Yes No

Do you have a designated, trained First Aider? Yes No

Have you gotten additional insurance? Yes No

What is the the amount needed in your troop's fundraising efforts?

What is the reason your are seeking additional funds outside of the council sponsored product sales?

Activity Notification

Money Earning Notification

DATE RECEIVED: _____ COUNCIL USE ONLY COUNCIL SIGNATURE: _____