

Additional Insurance Request

Please make all checks payable to "Girl Scouts of New Mexico Trails." Refer to Volunteer Essentials for more information.

Check the box next to the type of insurance you need (*check only one plan*):

- Plan 2--\$0.11 per person per day. For Non-Registered attendees, select this plan for events two (2) nights or fewer.
- Plan 3E--\$0.29 per person per day. Select this plan for events three (3) or more nights in duration for all attendees.
- Plan 3P--\$0.70 per person per day. Select this plan for events three (3) or more nights in duration for all attendees.
- Plan 3PI--\$1.17 per person per day. This plan is required for all attendees for international travel.

Troop/Group Leader name or name of person submitting this form: _____

Troop and/or Service Unit Number: _____

**There is a \$5.00 minimum purchase PER PAGE for all additional insurance requests.
You may combine events on one form to meet the \$5.00 minimum, if desired.**

Event Name and Location	Beginning Date	Ending Date	Number of Participants (A)	Number of Days (B)	Cost per Person per Day (C)	Total (A x B x C)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
Total						

COUNCIL USE ONLY

Date Received: _____ Date Submitted: _____ Date Purchased: _____

Amount Charged: _____ La Tienda Receipt Number: _____

Fund	GL	Department	Activity	Source	Location	Function
						3

Please submit this form to your local Membership Staff Member at least five (5) business days before your event.

Card Number: _____ Expiration Date: _____

Signature of Card Holder: _____ CVV: _____ Zip code: _____