

A Guide to:

gs troop travel

WHAT IS A GIRL SCOUT TRIP?

A troop trip is an opportunity for girls to learn, have fun, and experience adventure. Girls should plan it with guidance from adults. Girls should be active in planning, participate in pre-trip activities at troop meetings, and be prepared for travel prior to departure. When planning trips with girls, be sure to use [GSUSA Safety Activity Checkpoints](#).

Learning how to plan a trip should be a progressive experience for a Girl Scout - one that starts at a point she is ready to handle. Girl Scout Daisies, for example, might begin with a discovery hike. Girl Scout Brownies and Juniors should start with simple trips if they have never done any traveling. Once a troop understands the planning process, girls may progress to longer trips. As girls grow in their travel skills and experience they can better manage the planning processes, and progress to longer trips. Make sure the girls are progressing through the Ladder of Leadership and they are of the right age for the trips they plan. Use this guide during troop meetings to plan your trip.

- Day Trips: Daisies and older
- Simple Overnight Trips: Brownies and older
- Extended Overnight Trips: Juniors and older
- International Trips: Seniors and older

Day Trips

A Day Girl Scout troop trip is a trip that is under 150 miles or under two nights. These trips could include day trip to the fire station, or a local park. The Service Unit Manager approves all Day trips.

Simple Overnight Trips

A simple overnight Girl Scout troop trip is a trip that is under 150 miles or under two nights. These trips could include simple overnight at the zoo. The GSWRC Troop Support Specialists approves all simple trips.

Extended Trips

An extended Girl Scout troop trip is a trip that is over 150 miles away (one way) or over two nights. These trips could include a trip to the birthplace in Savannah, GA or a trip to Mammoth Cave for four days. The GSWRC Program department approves all extended trips.

International Trips

An International Girl Scout troop trip is a trip that is out of the United States. These trips could include a trip to one of the World Centers in Europe. The GSWRC Program department approves all International trips.

TROOP TRIP PROCEDURES

To assist troop mentors and other volunteers in planning trips we have developed the following guidelines. It is important for the safety of girls and adults participating in Girl Scout organized activities that you review and apply these guidelines when planning a trip. If you have any questions, please contact your Troop Support Specialist and/or the Program Department.

- All trips and overnights require Planning Trips with Girl Scouts.
- All camping trips require the appropriate level of Outdoor Training (Troop Camp Training or Out and About Training).
- Parent/Guardian Permission Slips are required for all trips and overnights.
- A trip should be suitable to the ages of the girls in the troop, should be girl-planned and reflect the financial resources of the troop and its members.
- Troops must obtain written permission from the Council for all trips away from their regular meeting place and all overnights according to the Troop Trip Guideline Chart (located in this document).
- Additional Insurance is required for all trips longer than 2 nights. Troops must send insurance information and money to the Lexington Service Center at least **3 weeks before the trip**.
- Before participating in a trip of more than 3 nights, a record of health examination given by a licensed physician, physician's assistant or registered nurse within the preceding 24 months is required. Refer to the Volunteer Essentials.
- Troops that hire or borrow vehicles must send, before the trip, a **CERTIFICATE OF INSURANCE** to the Lexington Service Center. The vehicle can be used only after Council approval has been obtained.

Adult Coverage

[Safety Activity Checkpoints](#) outlines the required girl/adult coverage ratio for all outings. Adults are defined as individuals 18 years or older. Trips or events must include:

- Two adults for every 5 Girl Scout Daisies, 12 Girl Scout Brownies, 16 Girl Scout Juniors, 20 Girl Scout Cadettes, 24 Girl Scout Seniors or Ambassadors;
- Plus one adult for each additional 3 Girl Scout Daisies, 6 Girl Scout Brownies, 8 Girl Scout Juniors, 10 Girl Scout Cadettes, 12 Girl Scout Seniors and Ambassadors.



GUIDELINES FOR TRIPS

This checklist may also be used as a guide in planning the agenda for a Parent/Guardian Information Meeting prior to final decision on trip.

I. Leadership

- Do the leaders know the girls well enough before the trip takes place?
- Are the leaders physically and emotionally equipped to handle a trip of the duration?
- For an extended trip, has a parent meeting been held with a member of the Service Team (not involved with the trip) on hand to hear the “back home” plans?
- Are the girls and leaders registered with the Girl Scouts of Kentucky’s Wilderness Road?
- Have girls been involved in the planning and implementing of the trip?
- Are girls prepared with the skills and knowledge needed to derive benefits from trip?
- Are most of the registered troop members involved in planning and participating in the trip?



II. Cost

Has the proposed budget been developed to include items such as:

- Each participant paying a portion
- Troop money earning project (approval required)
- Site rental/accommodations
- Equipment rental
- Transportation
- Additional insurance
- How will these costs be covered?
- Troop treasury funds per Girl Scouts

III. Parent/Guardian Permission

- Have parents been advised of all activities in which the girls will participate, including activities such as horseback riding, swimming, and theme park rides?
- Has the health history information been updated for each participant?
- Has written parental permission been obtained?

IV. Things to Consider

- What contingency plans have been made for sickness of girls or adults while away?
- Who is the Adult First-Aid/CPR Certified adult accompanying the troop?
- What activities might prove to be potential problems? How will these be handled?
- What activities are not allowed?

HOW TO START PLANNING THE TRIP:

As you and the girls, start planning their trip start with these questions and considerations.

Start with the basic questions:

- Where are we going?
- When are we going?
- How will we get there?
- How much will it cost?
- How should we prepare?
- What will we do along the way?
- What will we do when we get there?
- What will we do when we get home?

Then go one level deeper:

Where are we going?

- What are the goals for the trip?
- Does the destination have a tie-in to the Girl Scout program?
- What are the girls' expectations? What are the troop leaders' expectations?

When are we going?

- Check the calendar to be sure the date does not interfere with a religious observance, school trip, or other event, which will limit participation.

How will we get there?

- An opportunity for girls to participate in the planning begins here.
- Small groups, committees, or patrols can be assigned to check the costs of bus, train, and air fares; estimate mileage if going by car; and learn to use road maps.
- Have groups report findings back to the troop members for the purpose of discussion and decision-making.

How much will it cost?

- After this discussion, plan a budget based on several methods of transportation. Let girls decide which would be most advisable with leaders help, of course. Consider fees such as overnight lodging, food, etc., as part of the budget.

How to get ready:

Now the real fun begins. Activities at troop meetings could focus on:

- What safety procedures should we take?
- What games to play on the bus or train?
- What to wear? What to bring?
- What will we see along the way? What will we do when we get there?
- What forms need to be filled out, i.e., parental permission forms?
- Does each girl and parent/guardian understand the purpose of the trip?
- Introduce the girls to the things to look for and ask them what they expect to see, do, and accomplish.
- What will we do when we get home?
- Did the trip meet our expectations? Have troop members evaluate.
- Create a trip log and share with another troop or parents/guardians.
- Write thank you notes!
- Would you recommend this trip and itinerary to others?

Budgeting:

Consider cost factors when planning a troop trip.

A. What other types of program will be offered during the troop year if all troop money goes towards the trip?

B. What is the troop's projected income?

\$ ____ Dues

\$ ____ Cookies

\$ ____ Troop money earning projects (permission required)

C. What are the anticipated expenses?

\$ ____ Transportation

\$ ____ Meals

\$ ____ Accommodations

\$ ____ Activity Fees

\$ ____ Contingency Fund

\$ ____ Other

D. What will the trip cost per girl?

\$ ____ Total cost per person

E. What will be paid for by:

\$ ____ Troop funds

\$ ____ by Girl/Adult

Once the plans are almost final, submit a trip application – refer to this publication for more information on how to

**Jump Into Your Next
GREAT ADVENTURE**



TRIP APPLICATION INSTRUCTIONS

Follow the Trip Planning Timeline for submitting your application. Please fill out the Trip Application completely, and forward a copy to your Service Unit Manager, Troop Support Specialist, or GSWRC Program Department (depending on what type of trip the girls have planned). GSWRC staff and/or Service Unit Manager is to be notified prior to any troop activity occurring away from the regular troop meeting place and/or regular meeting time. This includes but is not limited to individually registered girls.

Please include a copy of the Trip Participants List with the application for trips longer than 2 days. The application will be reviewed for approval and troop mentors or volunteers will be contacted only if additional information is needed or if there are other questions about the trip. **Troop Trip Approval is not required for Service Unit or Council Sponsored events.**

NOTE: Please remember to take permission slips, the Girl Health History Record and Accident Insurance Claim forms, and a first aid kit on all trips.

I hope many **girls** will get to have **this same kind of experience** because that's what **Girl Scouts do:** they go on **adventures** and **make memories forever.**

Prior to filing out your application, be sure that:

- All girl members and adults are registered with the Girl Scouts of Kentucky's Wilderness Road.
- All adults have a background check through the Girl Scouts of Kentucky's Wilderness Road.
- Adults participating in trip understand the purpose of the trip, health and safety requirements, and their role in the girl/adult partnership.
- The trip is appropriate for your program level - i.e. consider length of time, distance, activities, and readiness of troop members.
- The cost of the trip is feasible for the troop and manageable for each individual troop member.
- Adequate adult coverage is in compliance with Girl Scouts of the USA's [Safety Activity Checkpoints](#).
- Trip plans were shared with all parents/guardians.

Parent/Guardian Permission

Trips of short duration use regular permission forms. For extended trips or expensive trips, a Parent/Guardian Information Meeting should be held in addition to the permission forms.

UNDERSTANDING WHICH ACTIVITIES ARE NOT ALLOWED

In an exciting, learning-by-doing environment like Girl Scouting, it's only natural that girls will sometimes want to take part in activities not covered in Safety Activity Checkpoints. When activities involve unpredictable safety variables, they are not recommended as Girl Scout program activities. These include but are not limited to:

Aerial tricks on bicycles, skis, snow boards, skateboards and water skis	Paintball Tagging
Ballooning (Tethered or Untethered)	Parachuting/Skydiving
Bubble Soccer/Zorbing	Parasailing
Bungee jumping	Trampolining (outdoor)
Flying in small planes, helicopters, sailplanes and blimps	Riding motor bikes, all-terrain vehicles
Hang Gliding	Using personal watercraft
Hunting	Watercraft trips in Class IV and above
Jet Skiing or using Wave Runners	Whitewater on unclassified rivers

HIGH RISK

GSWRC considers some activities to be High Risk. In addition to following the Safety Checkpoints, they require special permission on the Parent Permission Form and the vendor must be on the Council vendor list in order to have Council permission. Vendors on the list have provided proof of insurance and follow required safety procedures. Contact the Council Program and Camp Department if there is a location that is currently not on our approved vendor list. GSWRC requires when attending a High Risk Activity, attendees must complete a high-risk form, and submitted with your troop trip approval. Below is a list of many common high-risk activities that need vendor approval:

Aquatic Bounce Houses/Slides/Climbing Walls	Guns – Air/BB/Pistol/Rifle/Shotgun	Skiing/Snow Boarding/Snow Shoeing/Snow Tubing
Archery/3-D Archery	Horseback riding	Target Paintball
Backpacking	Indoor Skydiving	Trampolining (Indoor)
Boating/Sailing	Knife Throwing	Water Skiing/Wind Surfing/Wakeboarding
Canoeing/Kayaking	Recreational Tree Climbing	Whitewater Rafting
Caving/Spelunking	Rock Climbing/Climbing/Rappelling	Zip Lining
Challenge Courses	Scuba Diving/Snorkeling	
Go-Karts	Segway	

TRIP PLANNING GUIDELINE CHART

Type of Trip	1. DAY TRIP Less than 150 miles away from meeting location.	2. DAY TRIP - Over 150 miles from meeting location	3. SIMPLE OVERNIGHT- OVERNIGHT 1-2 NIGHTS - Less than 150 Miles from meeting location.
	Example: neighborhood trip, museums, Fire Department, library etc.	Example: Louisville Science Center, Newport Aquarium, Mammoth Cave. <i>** Additional insurance is needed.</i>	Example: Troop Camping, overnight at planetarium etc.,
Levels	All Levels* <i>* It is recommended that Daisy Girl Scout troops not plan trips that are too lengthy for this young age level.</i>	All Levels* <i>* It is recommended that Daisy Girl Scout troops not plan trips that are too lengthy for this young age level.</i>	Girl Scout Brownie Girl Scout Juniors Girl Scout Cadettes Girl Scout Seniors Girl Scout Ambassadors
Prior to Departure	2-4 Weeks - Allows time to: Discuss activity check points from Safety Activity Checkpoints Discuss budgets Make arrangements with facility Discuss transportation Distribute and collect Parent/ Guardian Permission Forms	2-4 Weeks - Allows time to consider all to the left, plus: All driving adults are registered and background checked.	4-6 Weeks —Allows time to consider all the left, plus: Budgeting Contract, deposits, etc. Girl Health History Form
Permission/ Approval	Submit Troop Trip Application to Service Unit Manager and Troop Support Specialist. Additional Insurance for non-registered participants	Submit Trip Application to your Service Unit Manager and Troop Support Specialist. Additional Insurance for participants. Submit Additional Insurance form and payment for approval.	Submit Trip Application to Service Unit Manager and Troop Support Specialist.
Approval Deadline	2 weeks	3 weeks	4 weeks
Training Required	Welcome to Girl Scouts Troop Essentials First Aid/CPR Certification	Welcome to Girl Scouts Troop Essentials First Aid/CPR Certification	Welcome to Girl Scouts Troop Essentials First Aid/CPR Certification Planning trips with Girl Scouts

Type of Trip	4. OVERNIGHT TRIPS 1-2 NIGHTS - Over 150 miles from meeting location Example: Columbus OH, Gatlinburg, TN etc. <i>** Additional insurance is needed.</i>	5. OVERNIGHT TRIPS MORE THAN TWO NIGHTS AWAY—Over 150 miles from meeting location Example: Savannah, GA, New York City etc. <i>** Additional insurance is needed.</i>	6. INTERNATIONAL Example: Pax Lodge, Europe, Mexico etc. <i>** International insurance is needed.</i>
Levels	Girl Scout Juniors Girl Scout Cadettes Girl Scout Seniors Girl Scout Ambassadors	Girl Scout Juniors Girl Scout Cadettes Girl Scout Seniors Girl Scout Ambassadors	Girl Scout Seniors Girl Scout Ambassadors
Prior to Departure	4-6 Weeks —Allows time to consider all above plus: Extensive budgeting Parent meeting Contract, deposits, etc. Girl Health History Form High Risk forms (if necessary)	6 Months-12 Months —Allows time to consider all above plus: Hold parent information meeting and discuss budget Discuss activity checkpoints in Safety Activity Checkpoints Consider contracts, deposits for transportation, and accommodations Troop money earning project (Council approval required) Girl Health History Form High Risk forms (if necessary)	18 Months —Allows time to consider all above and to the left
Permission/ Approval	Submit Trip Application and application to Service Unit Manager and Program Department . Submit Additional Insurance form and payment for approval.	Submit Trip Application and application to Service Unit Manager and Program Department . Submit Additional Insurance form and payment for approval.	Submit Trip Application and application to Service Unit Manager and Program Department . Submit Additional Insurance form and payment for approval.
Approval Deadline	6 weeks	8 weeks	12 Months
Training Required	Welcome to Girl Scouts Troop Essentials First Aid/CPR Certification Planning trips with Girl Scouts	Welcome to Girl Scouts Troop Essentials First Aid/CPR Certification Planning trips with Girl Scouts	Welcome to Girl Scouts Troop Essentials First Aid/CPR Certification Planning trips with Girl Scouts

LEADERS' NOTE: Refer to [Safety Activity Checkpoints](#) for requirements for “high risk” activities, and activities that are not permitted as Girl Scout program activities.

PRIVATE TRANSPORTATION: PROCEDURES, GUIDELINES, AND RECOMMENDATIONS

Standard Private Transportation Guidelines from GSUSA and GSWRC:

“Private passenger cars, station wagons, and vans may be used during Girl Scout activities. They must be properly registered, insured, and operated by adults with a valid license for the type and size of vehicle used. Any other form of private transportation may be used only after Council approval has been obtained.” — Volunteer Essentials.

When transporting girls to planned Girl Scout field trips and other activities that are outside the normal time and place, every driver must be an approved adult volunteer and have a good driving record, a valid license, and a registered/insured vehicle. Insist that everyone is in a legal seat and wears her seat belt at all times, and adhere to state laws regarding booster seats and requirements for children in rear seats.

Transporting Girls How parents decide to transport girls between their homes and Girl Scout meeting places is each parent’s individual decision and responsibility. For planned Girl Scout field trips and other activities (outside the normal meeting time and place) in which a group will be transported in private vehicles keep in mind the following:

- Every driver must be an approved volunteer at least 21 years old, and have a good driving record, a valid license and a registered/insured vehicle.
- Girls never drive other girls.
- If a group is traveling in one vehicle, there must be at least two unrelated, approved adult volunteers in the vehicle, one of whom is female. In addition, the girl-volunteer ratios in the “Knowing How Many Volunteers You Need” section of volunteer essentials must be followed.
- If a group is traveling in more than one vehicle, the entire group must consist of at least two unrelated, approved adult volunteers, one of whom is female, and the girl-volunteer ratios in the “Knowing How Many Volunteers You Need” section must be followed. Care should be taken so that a single car is not separated from the group for an extended length of time.

Please ensure that:

- The number of passengers does not exceed the intended passenger limits of the vehicle.
- Each person has her or his own seatbelt or booster seat.
- There is adequate space for luggage and equipment, which is stowed securely.
- All vehicles are equipped with a first aid kit.
- No alcohol or drugs are consumed before or during Girl Scout trips. Please be aware that some over-the-counter medications may cause driving impairments.
- All city and state traffic laws and regulations are followed.
- Appropriate behavior while in the vehicle is discussed with girls before each trip.
- Each driver has a copy of destination directions and phone numbers.
- The vehicle stops and pulls off the road to a safe location if there is a need for the driver to make phone calls or text someone.
- All girls under the age of 12 ride in the back seat.

Vehicle Rental and Private Transportation

When hiring a private bus company, we recommend that troop mentors check their safety record on the Department of Transportation website. We recommend that troop mentors do not contract with any company with noted safety violations. If a posting is made to the DOT site after a bus company is contracted and the company cannot be changed before the trip, we ask that troop leaders ensure that chaperones are aware of any concerns and be vigilant when travelling. <http://cms.fmcsa.dot.gov/safety/passenger-safety/search/by-company>

Private transportation includes private passenger vehicles, rental cars, privately owned or rented recreational vehicles and campers, chartered buses, chartered boats and chartered flights. Each driver of motorized private transportation must be at least 21 years old and hold a valid operator’s license appropriate to the vehicle. In addition, state laws must be followed, even if they are more stringent than the guidelines here. Anyone who is driving a vehicle with 12 or more passengers must be a professional driver who possesses a commercial driver’s license (CDL). **Fifteen passenger vans are not recommended.** Please keep in mind the following non-negotiable points regarding private transportation:

- Even though written agreements are always required when renting or chartering, you are not authorized to sign an agreement or contract, except for rental car agreements, even if there is no cost associated with the rental. Such agreements must instead be signed by GSWRC.
- Permission must be obtained by GSWRC if you use a rented car. **Submit your rental agreement to the program department with your troop trip paperwork as well as the driving record request form.** When renting a vehicle, read all rental agreements to be sure you comply with their terms and avoid surprises. For example, in many cases the minimum age of drivers is 25, and the maximum age is often under 70. In addition, make sure the car is adequately insured and you know who is responsible for damage to, or loss of, the vehicle. Finally, ensure you have a good paper trail that shows the vehicle rental is Girl Scout-related.

TIPS FOR DRIVER SAFETY

Before beginning an extended trip, review the safety facts and safe driving tips for various circumstances.

Bad Weather

Don't drive in bad weather, or, if on the road, slow down or stop after pulling as far off the roadway as possible. Bad weather causes increased chances of accidents due to poor visibility; moisture on the road causes hydroplaning; and wet roads reduce traction, which increases the distance needed to stop.

Following Distance

Always keep the proper distance between you and the vehicle ahead. This allows time for you to respond. Use a 3-second rule if you are driving a car. Watch the car ahead as it passes an object on the side of the road. Count "1000-1, 1000-2, 1000-3." If you pass that object before you end the count, then you are too close. Back off. If you are driving a van or a vehicle loaded with lots of gear, increase the count to 1000-4. During bad weather, increase your count. It will take you longer to stop.

Rest Up

Do not drive while tired or taking medication that could make you drowsy. You can actually "micro sleep" while you drive, which is highly dangerous in a moving vehicle.

Distractions

Do not take your eyes off the road for any reason. If you need to resolve an argument among passengers, read a map, or use a cellular phone, pull off the road at an exit or rest area.

Anticipate

Keep your eyes on the road. Continuously scan your mirrors. Watch the road on all sides. If something is happening, you can stop or accurately determine how to avoid the problem. Watch the brake lights of the car ahead or for warning signs along the road.

Be Visible

Drive with your headlights on. Do not drive in the blind spots of other vehicles, especially large trucks. Use your turn signals when changing lanes or preparing to turn.

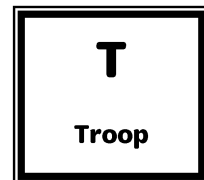
Adhere to Posted Speed Limits

Excessive speed can cause accidents because you need more time and distance to be able to react or stop.

Seat Belts On

Require all passengers to buckle up before you start the vehicle.

SAFE PASSENGER PLEDGE AND SAFE DRIVER PLEDGE



SAFE PASSENGER PLEDGE

As a passenger on a Girl Scout Trip, I understand it is my responsibility to help ensure our safety. I pledge to be a great passenger by following the rules for this trip:

Keep my seatbelt fastened around me.

Help the driver keep us safe by practicing good behavior, especially by not yelling, arguing, fighting, or throwing things that could be distracting.

Ask if there are any landmarks to find that would help the driver navigate.

Play games or music **QUIETLY** with other passengers.

Stay with my group when we stop.

Alert the driver to any problems like a door being open, a missing buddy, or anything the driver can't see, such as something behind the vehicle as it is backing up.

Follow instructions given by the driver before and during the trip.

Passenger's Signature: _____ Date: _____

SAFE DRIVER PLEDGE

As a driver for a Girl Scout Activity, I understand it is my responsibility to transport girls safely to the scheduled activity and back to their parents/guardians. To ensure the safety of the girls, I pledge to:

Make sure that the vehicle is in safe operating condition before the trip.

Be sure that everyone is wearing a seatbelt at all times while the vehicle is moving.

Drive within posted speed limits.

Use turn signals for all turns and traffic lane changes.

Yield to all oncoming traffic and be extra careful when making left turns.

Keep at least a four-second interval between my vehicle and the vehicle in front of me when highway driving.

Drive with extra caution during hours of darkness when visibility is reduced.

Plan extended trips to avoid driving in the dark.

Never drive when sleepy.

Take a rest break every 2 hours.

Alternate drivers when I need a break.

Drive no more than 6 hours a day.

Never use a cellular phone while driving. I will pull over and stop, put the car in park, and put on flashing lights before dialing.

Never use alcohol or medication that may make me drowsy.

Driver's Signature _____ Date: _____

ADDITIONAL INSURANCE

All troop members are provided Basic Activity Insurance by GSUSA upon registration and payment of the \$25 national registration fee (Plan 1). This is why it is so important to get the troop registration completed and returned to the Council in a timely manner. This insurance covers registered members for troop meetings, activities and events lasting two consecutive nights or less and pays up to \$10,000 in medical expense (with a non-duplication provision).

Guests (parents, guest speakers, other “tag-a-long” children not registered with the troop but who are present in a troop meeting or activity) are not covered under the Basic Activity Insurance Plan. In addition, if the troop has an activity/trip/event lasting more than two consecutive nights, neither the troop nor any guests are covered under the Basic Activity Insurance Plan.

To protect your troop and any guests, there are additional insurance plans available. You may have different needs during the year. To help you determine which plan may be best for your particular activity, event or trip, please read the following information. Also, be sure to read the plan descriptions for complete information. Decide which plan best suits your needs and complete the Request for Additional Insurance Form. Return the form to the Council with your trip application and payment of the premium. Please note that the insurance needs to be received by the Council at least three weeks before the start of the activity/event/trip in order for coverage to apply. If you have any questions, please contact the GSWRC Office Manager or Program Department.

The following is a general overview of the Additional Insurance Plan. Refer to the plan descriptions for complete details particularly regarding trips.

GIRL SCOUT ACTIVITY ACCIDENT INSURANCE PLANS

PLAN 1: Girl Scout Basic Activity Accident Insurance covers every registered member for accidents occurring while participating in any approved, supervised activity of the Girl Scouts, except events lasting more than two consecutive nights (a third night is covered only for any official federal holiday). This plan carries a non-duplication provision*. Pays up to \$10,000 in medical expense. Cost of premium is included in registration fee.

ADDITIONAL INSURANCE PLANS

Plan 2, Plan 3E, 3P or 3PI coverage is needed for events or activities for longer periods and/or to insure persons who are not registered Girl Scouts.

PLAN 2: Accident Insurance for Activities or Events Excluded Under the Basic Plan —designed to provide the same level of benefits for approved, supervised activities/events excluded under the Basic Plan. **Non-members participating in Girl Scouts events can be insured under this plan.** This plan should be considered if the event is of a short duration and/or close to home. Examples of such activities/events are field trips

or camping on long weekends. **All participants, members and nonmembers, must be insured.** Plan 2 provides coverage for accidents and includes all participants for events lasting more than two consecutive nights (three nights when one is an official federal holiday). Non-duplication provision included in their plan*. Pays up to \$10,000 in medical expense. Cost of premium: \$.11 per person per day, with a minimum premium of \$5.00.

Please note: to cover guests at troop meetings please multiply (# of guests) x (# of troop meetings) x (\$.11).

PLAN 3E: Accident and Sickness Insurance for Activities or Events Excluded Under the Basic Plan – provides **sickness and accident** coverage for all participants in an approved Girl Scout activity/event lasting more than two nights (three when one of the nights is an official federal holiday). It is designed for extended trips. **All participants, members and nonmembers, must be insured.** This plan has a non-duplication Provision*. Cost of premium: \$.29 per person per day, with a minimum premium of \$5.00. Pay up to \$5,000 in medical expenses for sickness and up to \$10,000 for accident.

PLAN 3P: Accident and Sickness Insurance for Activities or Events Excluded Under the Basic Plan – same as Plan 3E with the exception that it is **not subject to the non-duplication provision***. It is recommended for extended trips. Cost of premium: \$.70 per person per day, with a minimum premium of \$5. Pays up to \$5,000 in medical expenses for sickness and up to \$10,000 for accident.

PLAN 3PI: International Travel Plan. Accident and Sickness Insurance for Activities or Events excluded under the basic Plan – same as Plan 3P, but with international travel assistance services “Safety Net” feature** added (see description below). This is the only plan that covers international travel. Cost of premium: \$1.17 per person per day, with a minimum premium of \$5. Pays up to \$10,000 in medical expenses for sickness and up to \$15,000 for accident.

***Non-duplication Provision:** Up to \$100 in medical or dental expenses is paid by the insurance company without regard to other insurance. If the claim exceeds that amount, benefits are paid only for covered expense, which is not payable under any other insurance policy or service contract.

****International Travel Assistance Services “Safety Net”:** Should a medical or other emergency occur while abroad, the leader is a free telephone call away from mobilizing AXA Assistance resources to provide their hands-on assistance. AXA Assistance Services can be secured in an emergency 24 hours a day around the globe by making a toll-free or collect telephone call to its services center. This company is strategically located worldwide to intercede locally whenever needed in an emergency. Physicians and nurses working with AXA are available to interact immediately when notified of an emergency, thus ensuring continuous contact between all interested parties, including the treating physician(s), facilities, home physician(s), family members, and the Council.

For further information regarding insurance, please call the GSWRC Office Manager.

REQUEST FOR NON-SCOUT INSURANCE



Additional insurance must be purchased for all non-registered person(s).

There is a \$5.00 minimum on all insurance purchases. All insurance forms are due at least 2 weeks in advance of event date. Insurance cannot be purchased with cookie dollars.

Plan 1 -Basic coverage:

To properly calculate the amount, you will need to know:

- Total number of non-scouts attending
- Multiply the non-scout number by the number of days, not nights, of the event
- Multiply that number by 0.11 to get the correct total.

Number of Non-Scouts: _____ Date(s) of Event: _____

Event: _____

Location: _____

Date(s): _____

Mentor/Coordinator Name: _____ Troop #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Mentor/Coordinator Signature: _____ Date: _____

**We accept check, money order, Visa and MasterCard.
Make checks and money orders payable to GSWRC.**

Amount Enclosed \$ _____

For credit cards (Please check one): _____ Visa _____ MasterCard Exp. Date: Month/Year: ____/____

Account Number (Fill in all digits as shown on card): _____ V-Code: _____

Print name as it appears on card: _____

Signature: _____

For Additional Information regarding insurance please contact the GSWRC Office Manager.

**Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org**

REQUEST FOR EXTENDED TRIP INSURANCE

(FOR TRIPS LONGER THAN 2 NIGHTS OR OVER 150 MILES (ONE WAY) FROM MEETING LOCATION)

Mentor/Coordinator Name: _____ Troop #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Location: _____

Date(s) of Trip: _____

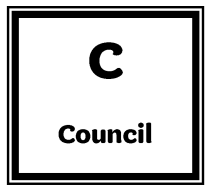
Mentor/Coordinator Signature: _____ Date: _____

Schedule of Each Event							
Name and Location of Event	Beginning Date	Ending Date	Number of Participants	Number of Days	Number of Participant Days (1x2)	Premium Each Day @ \$0.70	Total (3x4)
Example:							
Juliette Low Birthplace, Savannah, GA	2-5-18	2-9-18	25	5	125	\$0.70	\$83.75
Total:	N/A	N/A					

1. List the name and location of your trip.
2. Beginning date is the day you leave and the ending date is when you return home.
3. Total participants (girls and adults).
4. **Total number of days.**
5. Multiply participants times day and then multiply by \$0.70
6. Total payment for insurance must be received at least **3 weeks before your trip.**
7. Please send this form and payment (payment can be taken over the phone) to the GSWRC Office Manager.

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

REQUEST FOR INTERNATIONAL TRIP INSURANCE



Mentor/Coordinator Name: _____ Troop #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Location: _____

Date(s) of Trip: _____

Mentor/Coordinator Signature: _____ Date: _____

Schedule of Each Event							
Name and Location of Event	Beginning Date	Ending Date	Number of Participants	Number of Days	Number of Participant Days (1x2)	Premium Each Day @ \$1.17	Total (3x4)
Example:							
Our Chalet, Switzerland	3-10-17	3-21-17	12	11	132	\$1.17	\$154.44
Total:	N/A	N/A					

1. List the name and location of your trip.
2. Beginning date is the day you leave and the ending date is when you return home.
3. Total participants (girls and adults).
4. **Total number of days.**
5. Multiply participants times day and then multiply by \$1.17
6. Total payment for insurance must be received at least **3 weeks before your trip.**
7. Please send this form and payment (payment can be taken over the phone) to the GSWRC Office Manager.

TROOP TRIP CHECK LIST

The forms in this packet all include a code to assist volunteers in turning in the correct forms to GSWRC. Forms with a C should be submitted with your Trip Application. Forms with a T should remain with the Troop or Trip organizer.

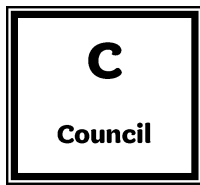
DAY TRIPS/SIMPLE OVERNIGHTS

- _____ Required Training Courses
- _____ Girl Scout Registrations/Background Checks
- _____ Trip Application for Day Trip/Simple Overnights
- _____ Girl/Adult Health History Forms
- _____ Parent Permission Forms
- _____ Additional Insurance for non-registered members
- _____ Safe Driver and Passenger Pledge
- _____ High Risk Activity Forms (if applicable)
- _____ Accident – First Report for Volunteers/Girls

EXTENDED/INTERNATIONAL TRIPS

- _____ Required Training Courses
- _____ Girl Scout Registrations/Background Checks
- _____ Trip Application for Extended/International Trips
- _____ Girl/Adult Health History Forms
- _____ Parent Permission Forms
- _____ Extended/International Insurance
- _____ Safe Driver and Passenger Pledge
- _____ Travel Itinerary
- _____ Participant Roster
- _____ Participant Agreement for Girls and Adults
- _____ Vehicle Leasing Form (Only if rental vehicles will be used)
- _____ Check Driving Record Request Form (Only if rental vehicles will be used)
- _____ Register your trip with U.S. Government's Smart Travel Alert Program (International Travel Only)
- _____ Confirm the Travel advisory level for the Country & give to parents/guardians (International Travel Only)
- _____ High Risk Activity Forms (if applicable)
- _____ Accident – First Report for Volunteers/Girls
- _____ Trip Evaluation (once you return)

TRIP APPLICATION FOR DAY TRIPS AND SIMPLE OVERNIGHTS



(NOT TO EXCEED 2 CONSECUTIVE NIGHTS OR OVER 150 MILES)

INSTRUCTIONS FOR VOLUNTEERS: Please complete the application and forward to your Service Unit Manager and Troop Support Specialist. **Additional insurance must be purchased for all non-registered person(s). Request for additional insurance must be submitted with the appropriate fee and included with this application.** Registered Girl Scouts (girls and adults) are automatically covered by Girl Scout insurance for two nights or less. You will be notified of the status of your request. This form must be approved before girls proceed with further planning.

VOLUNTEER INFORMATION:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Cell #: _____ Tel Day: _____ Tel Eve: _____
Email: _____

TROOP INFORMATION:

Service Unit: _____ Troop #: _____
Program Level(s): ____ Daisy ____ Brownie ____ Junior ____ Cadette ____ Senior ____ Ambassador
Total Number of Participants: _____ Registered Girls: _____ Registered Adults: _____ Non-Registered Person(s): _____

TRIP INFORMATION:

Name of Place: _____ Tel: _____
Location Address: _____
City: _____ State: _____ Zip: _____
Departure Date: _____ Time: _____ Departing Location: _____
Return Date: _____ Time: _____ Departing Location: _____
Traveling by: ____ Private Car ____ Rental Van or Car ____ Charter Bus ____ Other Transportation: _____
Name of Rental or Bus Company (if applicable): _____
Description of High Risk Activities (if applicable): _____

NOTE: Make sure parent permission forms are collected prior to the trip, and Girl Health History forms are available to the first aider on the trip. If High Risk Activities are scheduled, include all participant's high-risk activity forms with this application.

EMERGENCY HOME CONTACT: Our contact person below will have a complete Trip Participant List including the names, addresses, and phone number of all participants. **This person must be someone who is not attending the trip.**

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Cell #: _____ Tel Day: _____ Tel Eve: _____
Email: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

TRIP APPLICATION FOR DAY TRIPS/SIMPLE OVERNIGHTS

(CONTINUED)

ADULT SUPPORT AND CERTIFICATION: The Adults listed below are participating on this trip and have completed the necessary training for this trip. (Please attach a copy of this certification):

Adult Leading trip if someone other than Troop Mentor: _____

Certified First Aider attending Trip: _____

Adult with Troop Camp Certification: _____

Adult who has completed Planning Trips with Girl Scouts (If trip is an overnight): _____

DRIVER INFORMATION: All adults who will be transporting girls other than their own daughters must be a registered member of Girl Scouts of Kentucky's Wilderness Road, and have a current background check.

	Name	Drivers License #	Insurance Co.	Policy #
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

BUDGET INFORMATION:

No. of girls registered in troop: _____ Troop treasury will pay: _____

No. of girls participating in the trip: _____ Participant will pay: _____

Total cost per person: _____

ADDITIONAL INSURANCE:

To request Additional Insurance, attach Additional Insurance Form with full payment to your trip application **(must be a minimum of \$5)**

CHECKLIST FOR TRIP APPROVAL:

WE HAVE:

- _____ Used the Planning Trips with Troops information planning
- _____ Used [Safety Activity Checkpoints](#) publication and other appropriate activity checklists
- _____ Involved troop members in planning

It is recommended that all trips relate to a program activity. How does this trip relate to your program level?

I understand providing misinformation could result in the trip not being covered by Girl Scout Activity Insurance and could increase personal liability. Additionally, I have read and understand GSWRC Policies.

Troop Mentor/Trip Organizer Signature: _____ Date: _____

TRIP APPLICATION APPROVAL: This application has been reviewed and approval as appropriate by:

Service Unit Manager Signature: _____ Date: _____

Troop Support Specialist Signature: _____ Date: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org



TRIP APPLICATION FOR EXTENDED

(EXCEEDS 2 CONSECUTIVE NIGHTS OR OVER 150 MILES)



INSTRUCTIONS FOR VOLUNTEERS: Please complete the application and forward to your Service Unit Manager and GSWRC Program Department. **Extended insurance**

must be purchased for all participants. Request for additional insurance must be submitted with the appropriate fee and included with this application. You will be notified of the status of your request. This form must be approved before girls proceed with further planning.

VOLUNTEER INFORMATION:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Cell #: _____ Tel Day: _____ Tel Eve: _____
Email: _____

TROOP INFORMATION:

Service Unit: _____ Troop #: _____
Program Level(s): ___Daisy___ ___Brownie___ ___Junior___ ___Cadette___ ___Senior___ ___Ambassador___
Total Number of Participants: _____ Registered Girls: _____ Registered Adults: _____ Non-Registered Person(s): _____

TRIP INFORMATION:

Name of Place: _____ Tel: _____
Location Address: _____
City: _____ State: _____ Zip: _____
Departure Date: _____ Time: _____ Departing Location: _____
Return Date: _____ Time: _____ Departing Location: _____
Traveling By: ___Private Car___ ___Rental Van or Car___ ___Charter Bus___ ___Plane___ ___Other Transportation___
Name of Rental or Bus Company (if applicable): _____
Departure Airport: _____ Flight Numbers: _____
Return Airport: _____ Flight Numbers: _____
Description of High Risk Activities (if applicable): _____

NOTE: Make sure parent permission forms are collected prior to the trip, and Girl Health History forms are available to the first aider on the trip. If High Risk Activities are scheduled, include all participant's high-risk activity forms with this application.

EMERGENCY HOME CONTACT: Our contact person below will have a complete Trip Participant List including the names, addresses, and phone number of all participants. **This person must be someone who is not attending the trip.**

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Cell #: _____ Tel Day: _____ Tel Eve: _____
Email: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

TRIP APPLICATION FOR EXTENDED TRIPS (CONTINUED)

ADULT SUPPORT AND CERTIFICATION: The Adults listed below are participating on this trip and have completed the necessary training for this trip. (Please attach a copy of this certification):

Adult Leading trip if someone other than Troop Mentor: _____

Certified First Aider attending Trip: _____

Adult with Troop Camp Certification: _____

Adult who has completed Planning Trips with Girl Scouts (If trip is an overnight): _____

DRIVER INFORMATION: All adults who will be transporting girls other than their own daughters must be a registered member of Girl Scouts of Kentucky's Wilderness Road, and have a current background check.

	Name	Driver's License #	Insurance Co.	Policy #
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

BUDGET INFORMATION:

No. of girls registered in troop: _____ Troop treasury will pay: _____

No. of girls participating in the trip: _____ Participant will pay: _____

Total cost per person: _____

ADDITIONAL INSURANCE:

To request Extended/International Insurance, attach Additional Insurance Form with full payment to your trip application.

CHECKLIST FOR TRIP APPROVAL:

WE HAVE:

- _____ Used the Planning Trips with Troops information planning
- _____ Used [Safety Activity Checkpoints](#) publication and other appropriate activity checklists
- _____ Involved troop members in planning

It is recommended that all trips relate to a program activity. How does this trip relate to your program level?

I understand providing misinformation could result in the trip not being covered by Girl Scout Activity Insurance and could increase personal liability. Additionally, I have read and understand GSWRC Policies.

Troop Mentor/Trip Organizer Signature: _____ Date: _____

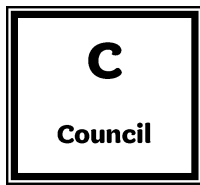
TRIP APPLICATION APPROVAL: This application has been reviewed and approval as appropriate by:

Service Unit Manager Signature: _____ Date: _____

Program Manager Signature: _____ Date: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

TRIP APPLICATION FOR INTERNATIONAL TRIPS



(EXCEEDS 2 CONSECUTIVE NIGHTS OR OVER 150 MILES)

INSTRUCTIONS FOR VOLUNTEERS: Please complete the application and forward to your Service Unit Manager and GSWRC Program Department. **International insurance must be purchased for all participants. Request for additional insurance must be submitted with the appropriate fee and included with this application.** You will be notified of the status of your request. This form must be approved before girls proceed with further planning. **Prior to applying, please review Safety Activity Checkpoints for International Travel.**

VOLUNTEER INFORMATION:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Cell #: _____ Tel Day: _____ Tel Eve: _____
Email: _____

TROOP INFORMATION:

Service Unit: _____ Troop #: _____
Program Level(s): ___Daisy___ ___Brownie___ ___Junior___ ___Cadette___ ___Senior___ ___Ambassador___
Total Number of Participants: _____ Registered Girls: _____ Registered Adults: _____ Non-Registered Person(s): _____

TRIP INFORMATION:

Name of Place: _____ Tel: _____
Location Address: _____
City: _____ State: _____ Zip: _____
Departure Date: _____ Time: _____ Departing Location: _____
Return Date: _____ Time: _____ Departing Location: _____
Traveling By: ___Private Car___ ___Rental Van or Car___ ___Charter Bus___ ___Plane___ ___Other Transportation___
Name of Rental or Bus Company (if applicable): _____
Departure Airport: _____ Flight Numbers: _____
Return Airport: _____ Flight Numbers: _____
Description of High Risk Activities (if applicable): _____

NOTE: Make sure parent permission forms are collected prior to the trip, and Girl Health History forms are available to the first aider on the trip. If High Risk Activities are scheduled, include all participant's high-risk activity forms with this application.

EMERGENCY HOME CONTACT: Our contact person below will have a complete Trip Participant List including the names, addresses, and phone number of all participants. **This person must be someone who is not attending the trip.**

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Cell #: _____ Tel Day: _____ Tel Eve: _____
Email: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

TRIP APPLICATION FOR INTERNATIONAL TRIPS (CONTINUED)

ADULT SUPPORT AND CERTIFICATION: The Adults listed below are participating on this trip and have completed the necessary training for this trip. (Please attach a copy of this certification):

Adult Leading trip if someone other than Troop Mentor: _____

Certified First Aider attending Trip: _____

Adult with Troop Camp Certification: _____

Adult who has completed Planning Trips with Girl Scouts: _____

DRIVER INFORMATION: All adults who will be transporting girls other than their own daughters must be a registered member of Girl Scouts of Kentucky's Wilderness Road, and have a current background check.

	Name	Driver's License #	Insurance Co.	Policy #
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____

BUDGET INFORMATION:

No. of girls registered in troop: _____ Troop treasury will pay: _____

No. of girls participating in the trip: _____ Participant will pay: _____

Total cost per person: _____

ADDITIONAL INSURANCE:

To request Extended/International Insurance, attach Additional Insurance Form with full payment to your trip application.

CHECKLIST FOR TRIP APPROVAL:

WE HAVE:

- _____ Used the Planning Trips with Troops information planning
- _____ Used [Safety Activity Checkpoints](#) publication and other appropriate activity checklists
- _____ Involved troop members in planning
- _____ Registered your trip with U.S. Government's Smart Travel Alert Program
- _____ Confirmed the Travel advisory level for the Country & give to parents/guardians

It is recommended that all trips relate to a program activity. How does this trip relate to your program level?

I understand providing misinformation could result in the trip not being covered by Girl Scout Activity Insurance and could increase personal liability. Additionally, I have read and understand GSWRC Policies.

Troop Mentor/Trip Organizer Signature: _____ Date: _____

TRIP APPLICATION APPROVAL: This application has been reviewed and approval as appropriate by:

Service Unit Manager Signature: _____ Date: _____

Program Manager Signature: _____ Date: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

EXTENDED AND INTERNATIONAL TRIP PARTICIPANT ROSTER

For Extended Overnights and International Trips, a list of adults and girls attending must be completed.

ADULTS

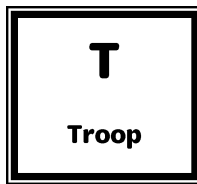
Name	Phone	Age	Emergency Contact	Phone

GIRLS

Name	Phone	Age	Emergency Contact	Phone

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

PARTICIPANT AGREEMENT FOR GIRLS



I understand that my attitude and behavior are critical to the success of the trip (or event or project). Therefore, for the good of the trip as well as my fellow group members, **I agree to abide by the following:**

1. I will try to be sensitive to the needs of each group member.
2. I will respect the places and the people with whom I come in contact.
3. I understand that the use of tobacco, alcohol, or drugs will not be tolerated, and that usage during the trip will result in expulsion from the trip.
4. I will be responsible for my personal belongings and equipment and will not hold the Girl Scout-Wilderness Road Council responsible for their loss or damage due to my negligence or neglect.
5. I will treat all equipment provided for my use with care. I understand that I will be assessed for damages to any equipment in the event that my use of such equipment is negligent or abusive.
6. I will use all required safety equipment and follow safety rules and procedures.
7. I agree to take my share of daily responsibilities such as food preparation, setting up camp, clean-up and shopping.
8. I understand that if I am sent home early due to any serious misconduct, it will be at my parent's or guardian's expense and that council staff will make the travel arrangements and notify my parent or guardian of those plans.

Participant's Signature

Date

I understand and agree with the above responsibilities of my daughter/girl:

Parent or Guardian's Signature

Date

PARTICIPANT AGREEMENT FOR ADULTS

For adults accompanying or supervising Girl Scouts participants in a neighborhood or council-sponsored event, project or trip:

I understand that as a leader of _____, I play an essential role in the success of this project and that my attitudes, behavior, and responsibilities as a role model are critical to the success of _____.

I, therefore, agree to do the following:

- Be sensitive to the needs of each girl participant.
- Respect the places and the people with whom I come in contact.
- Work with the Council's Program Director on all phases of planning and preparing for the project.
- Review and become familiar with all the materials and forms provided for this project in order to interpret them to girls and their families.
- See that all appropriate forms are completed by girls, their families, and/or physicians and return all forms to the Program Manager by the due date listed on each form.
- Provide all required information and forms for myself, such as health exams, emergency contacts, photo releases, etc.
- Follow GSUSA's Safety-Wise and the Council's health and safety standards during all phases of the project.
- Work under the direction of the event staff to ensure the participation of the girls in program activities, ceremonies, and tasks during the event, project, or trip.
- Carry out "adults only" responsibilities during the event (examples: serving hot foods, escorting girls to the event's health center).
- Understand that the use of tobacco, alcohol, and drugs will not be tolerated, and that usage during the event may result in expulsion from the event.
- Be responsible for my personal belongings and equipment.
- Treat equipment and supplies with care.
- Use all required safety equipment and follow agreed-upon safety rules and procedures.
- I understand that if I am dismissed due to any serious misconduct, it will be at my expense and that the Girl Scouts-Wilderness Road Council will make the travel arrangements.
- Assist the event staff and the Council in evaluating the event and the project.
- Ensure that our group has completed all pre-event requirements and has the necessary clothing and equipment.
- Provide supervision to our group throughout the event, project, or trip under the direction of the event staff.

Participant's Signature

Date

When leasing a vehicle for a trip, the following Council Policies must be followed:

1. The number of passengers must not exceed the intended passenger limits of the vehicle. Passengers must have and use their own individual seat belt. Applicable state statutes regarding child safety seats must be followed.
2. **Use of 15-passenger vans to transport girls is not permitted.** If a 12 passenger van is used, the occupant load must be a maximum of nine (9) passengers, with the rear seat(s) unoccupied, AND the driver should have driver training/experience related to 12 passenger vans.
3. Drivers must put safety first whenever driving. While driving, drivers should not make/receive cell phone calls unless using a hands-free device. Drivers are prohibited from using other cell phone features including text messaging, browsing the Internet, reading or sending emails, and playing games.
4. All vehicles must meet the Kentucky Responsibility Law.
 - a. For injury to, or death of, any one person in any accident: \$25,000
 - b. For injury to, or death of, more than one person in any accident: \$50,000
 - c. For property damage caused by one accident: \$10,000

Please refer to Volunteer Essentials for information regarding leasing a vehicle and safety precautions when transporting girls.

Insurance coverage

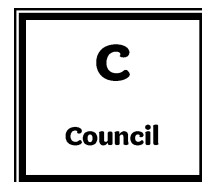
There are two kinds of insurance coverage that apply to leased vehicles: liability and physical damage coverage.

- Liability Coverage - This insurance protects a driver in case of accident resulting in a lawsuit. The minimum requirement for liability coverage on a leased automobile or van is \$1 million. You have two sources for securing this liability insurance coverage:
 1. The driver's personal liability insurance coverage
 2. The leasing agency's liability insurance coverage
- Physical Damage Coverage - This insurance coverage is to pay for any physical damage to the leased vehicle. You have two sources for this coverage: Each driver should check his/her own insurance to see what physical damage coverage may be included for leased vehicles.

Before your trip

- Purchase necessary insurance coverage from the leasing company.
- Lease the vehicle in the name of the primary driver. Make sure that all drivers are listed on the lease agreement. Provide the Council with necessary identifying information on the leased vehicle by completing and mailing the attached Vehicle Leasing Report along with a copy of the lease contract after you return from the trip.
- Complete the Add Driver and/or Check Driving Record Request Form and submit with other troop trip forms.

VEHICLE LEASING FORM



Troop Leader		Troop #	
Primary Driver		Phone#	
Driver's License #		State	
Mailing Address			
Leasing Company		Phone #	
Address			
Lease Contract #		Dates from to	
Vehicle Year, Make & Model	Vehicle Identification #	# Seat Belts	
Depart from		Destination	

Signature: _____ Date: _____

Troop Leader		Troop #	
Primary Driver		Phone#	
Driver's License #		State	
Mailing Address			
Leasing Company		Phone #	
Address			
Lease Contract #		Dates from to	
Vehicle Year, Make & Model	Vehicle Identification #	# Seat Belts	
Depart from		Destination	

Signature: _____ Date: _____

Girl Scouts of Kentucky's Wilderness Road 2277 Executive Drive Lexington, KY 40505
 Tel: 800-475-2621 Fax: 859-299-3692 www.gskentucky.org

This form **must be** completed by
anyone employed by the Council.

**WELLS
FARGO**

All information must be completed.
The insurance company **will not**
process or approve if there are blanks.

VOLUNTEER

Add Driver and/or Check Driving Record Request Form

TO: GIRL SCOUT SERVICES Wells Fargo Insurance Services USA, Inc 190 River Road – 1st floor Summit, NJ 07901 christine.cristadoro@wellsfargo.com	COUNCIL NAME: Girl Scouts of Kentucky's Wilderness Road Council
--	--

I am ☐ **Under 21** (Complete Name and Date of Birth only and return – not able to drive)

☐ **Over 21** (please continue)

<input checked="" type="checkbox"/> Add Driver and/or <input checked="" type="checkbox"/> Check Record	Name, <u>EXACTLY</u> as it appears on Driver's License			Date of Birth
License Number	License Expiration	Class or Type of License	State	Years of Driving Experience

Name of previous state if less than 5 years in current state: _____

Is driver licensed for and familiar with type of vehicle to be driven? ☐ Yes ☐ No

If no, when will training be completed? _____

How many years of driving experience does driver have in this type of vehicle? _____

What is the driver's experience in the last 5 years? (**Persons not providing driver's experience information cannot be approved to drive council owned, leased, or borrowed vehicles.**)

This information is for the past 5 years only. **Mark Boxes '0' if none.**

# of At-Fault Accidents	# of Violations	License Suspended?	Explain accidents, violations, suspensions. (Use additional sheet if necessary)
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Safe Driving Is A Top Girl Scout Priority

I warrant the above information is true and accurate to the best of my knowledge. I authorize any investigation of all statements herein and release the above named Girl Scout Council and its agents from liability in connection with any such investigation. I understand that untrue, misleading, or omitted information may result in dismissal, regardless of the time of discovery by the above named Girl Scout Council.

Signature of Driver

Date

HIGH RISK ACTIVITY PERMISSION FORM

Event _____ **Date** _____

This form is used for permission to participate in activities at Council sponsored events. Not all age groups will be involved with specific activities because of Safety Activity Check Points restrictions. **Please write in ink, not pencil!**

Name _____ Phone Number _____

Address _____

City _____ State _____ Zip _____

Email Address _____

Troop Number _____ Age Level: ☐ BR ☐ JR ☐ CA ☐ SR ☐ AM ☐ Adult

Date of Birth _____ Age (at time of event) _____

ACKNOWLEDGEMENT OF INHERENT RISK, WAIVER AND RELEASE OF LIABILITY. I, the Participant, acknowledge and understand that there are risks inherent in certain activities in Council-sponsored events (the "Activities" or "High Risk Activities"). Activities may include, but are not limited to: horseback riding, swimming, canoeing, sailing, white water rafting, rappelling, rock climbing, prusiking and caving. Activities may also take place on our Team's Challenge Course and Climbing Tower. I understand and acknowledge that my participation in such Activities involves risks and dangers which include, without limitation, the potential for serious bodily injury, permanent disability, paralysis, and loss of life; loss of or damage to equipment or property; equipment failure; situations beyond the immediate control of the GSWRC; and other risks and dangers which may or may not be readily foreseeable or are presently unknown. I hereby expressly assume all such risks and responsibility for any damages, liabilities, losses, injuries, or expenses that I incur as a result of my participation in the Activities. I, Participant, for myself, my heirs, executors, administrators, parent/guardian, and any persons or entities connected with me, hereby release and discharge GSWRC, its successors, predecessors, assigns, affiliates, the respective employees, officers, directors, or agents of it or them, and all other individuals or entities who or that are or might be connected with it or them or found to be jointly or severally liable with it or them ("Released Parties") from any and all charges, actions, causes of action, suits, sums of money, warranties, covenants, claims and demands, losses, expenses or attorney's fees for any damages or injuries arising in any way out of my participation in the Activities, including but not limited to claims for liability caused in whole or in part by the negligence of the Released Parties.

Signature of participant if 18 years old or over

Date

FOR MINOR PARTICIPANTS. As the parent or guardian of the minor participant identified above, I understand and hereby accept and agree to all of the terms and conditions described above on behalf of the minor in connection with the minor's participation in the Activities. I authorize and grant permission for the minor participant identified above to participate in all Activities.

Signature of Parent/Guardian

Date

Required for participant under age 18

Consent for Treatment

High Risk Activity Permission Form

I hereby authorize Girl Scouts Wilderness Road Council (GSWRC), its personnel, and the medical provider(s) selected by GSWRC to secure and/or administer emergency and/or non-emergency medical treatment, including but not limited to emergency care, hospitalization, other routine care; administering non-prescription and/or prescription drugs; prescribing drugs; ordering X-rays, tests or procedures, or other treatment; and any other medical procedures or related transportation arrangements which may be necessary for my daughter/ward or, if I am a Participant 18 years of age or older, for me.

I understand that GSWRC will attempt to contact the parent or guardian of a minor Participant, and/or any other individual identified as an emergency contact, as soon as practicable in the event of an emergency. However, I understand that this consent is given in advance of any accident, injury, or illness giving rise to the need for emergency medical treatment.

I authorize GSWRC to release any medical records necessary for insurance purposes.

I understand and agree that I am solely responsible for any costs, fees, payments or expenses associated with emergency and/or non-emergency medical treatment.

I further understand and agree that GSWRC, its affiliates, and their respective employees, officers, directors and agents, expressly disclaim responsibility, and shall have no liability, for any charges, actions, causes of action, suits, sums of money, warranties, covenants, claims and demands, losses, expenses or attorney's fees for any damages or injuries arising in any way out of emergency or non-emergency medical treatment provided by GSWRC, its personnel, and/or any medical provider selected by GSWRC.

Signature of participant if 18 years old or over

Date

FOR MINOR PARTICIPANTS:

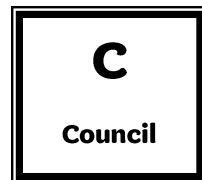
Print Parent/Guardian(s) Name

Print Minor Participant's Name

Parent/Guardian(s) Signature

Date

TRIP EVALUATION



Troop Number: _____ Date: _____

Total Number of Girls: _____ Total Number of Adults: _____

Program Level: _____ Mentor/Organizer Name: _____

Destination: _____ Dates Traveled: _____

1. Was the original itinerary followed? If not, give reasons:

2. Was original budget adequate? If not, please explain:

3. Were there any cases of illness or injury? If so, how were you treated?

4. Recognitions earned through participation in trip:

5. What advice would you give another troop planning a similar trip?

6. Would you be willing to share your experience with others? _____

7. What were the highlights of the trip? Girls and Leader/Advisor prepare together.

8. What was the least enjoyable experience on the trip? Why?

Mentor/Organizer Signature: _____ Date: _____

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