

Please read and complete the information below and return the form to your troop leader or Service Unit for every registered Girl Scout who participates in the council product programs.

GIRL SCOUT INFORMATION

Name: _____

Troop # or IRG: _____

Service Unit: _____

Grade Level: (circle below)

Daisy (grades K-1) Brownie (grades 2-3)

Junior (grades 4-5) Cadette (grades 6-8)

Senior (grades 9-10) Ambassador (grades 11-12)

PARENT/GUARDIAN INFORMATION

First Name: _____ MI: _____

Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Employer: _____

Work Phone: _____

Business Address: _____

City: _____ State: _____ Zip: _____

New York State Driver's License #: _____

Email Address: _____

My Girl Scout has my permission to participate in the Girl Scout Product Programs.

- I agree to accept full responsibility for all product and money received for GSWNY Product Programs.
- I agree to pay my Product Program bill in full and on time to the troop leader/volunteer. It is understood and agreed that in the event any outstanding balance has to be referred to a collection agency or attorney for recovery, I will be fully responsible for all collection agency fees and attorney's fees.
- I understand the income from the product programs does not become the property of individual girl members. Girls, however, may be eligible for incentives and credits that may be applied toward Council sponsored camps, programs, uniforms, and membership.
- I have reviewed the Girl Scout Internet Safety Pledge, Product Sale-Safety Activity Checkpoints, and Safety Tips for Product Sales (visit gswny.org and select forms).
- Girl Scout Law says, "I will do my best to be honest and fair." I agree that my Girl Scout will not sell prior to the first day of the Girl Scout Product Program.
- Recognize that Girl Scouting is girl-led so I will uphold the Girl Scout Promise and Law by demonstrating positive support and respecting the opinions and goals of my Girl Scout and other Girl Scout members.
- I understand that my behavior directly impacts my Girl Scout's ability to participate in a troop/group or other Girl Scout activities. I will honor this agreement so that my Girl Scout can have a high-quality Girl Scout Leadership Experience. I will take responsibility for my own behavior, abiding by the Girl Scout Promise and Law
- I understand that if I choose not to honor this agreement, it may impact my ability to participate in Girl Scouting.

Signature of Parent/Guardian: _____

Date: _____

This is a legally binding and enforceable agreement.