



Girl Scouts of Northern California with offices in: Chico, Eureka, Fairfield, Oakland, Red Bluff, Redding, San Jose, Santa Rosa, Ukiah, Yreka
 T (800) 447-4475 F (510) 633-7925
 www.GirlScoutsNorCal.org
 travel@girlscoutsnorcal.org

Trip & High-Risk Activity Notification and Approval Form

This form is recommended as a planning tool but is not required for:

- Service Unit activities
- Council sponsored activities in the *Choices* catalog
- Activities where girls walk or ride their own bicycles as part of their regularly scheduled meetings
- Trips that are located within one hour driving time or 60 miles from the regular meeting place, and are less than 6 hours in duration, and are not high-risk

For *all trips* you should always make sure your troop/group emergency contact person has updated information about the trip, girls and drivers.

This form must be completed and filed with service units for the following trips and high-risk activities:

Type of Activity	Procedures
<input type="checkbox"/> Trip farther than one hour driving time or longer than 6 hours in duration but not high-risk	File with service unit at least 2 weeks prior to the activity and give a copy to troop/group emergency contact person. Service Unit approves trip.
<input type="checkbox"/> Trip longer than two nights or involving air travel <input type="checkbox"/> High-risk activity	File with service unit at least 4 weeks prior to the activity and give a copy to troop/group emergency contact person. Forms will be forwarded to travel@girlscoutsnorcal.org for council approval.
<input type="checkbox"/> International Trip	File with service unit at least one year prior to the trip and give a copy to troop/group emergency contact person. Forms will be forwarded to travel@girlscoutsnorcal.org for council approval.

Leader Name _____	Phone # _____	E-mail Address _____
Address _____	Troop # _____	o D o B o J o C o S o A (Troop Grade Level)
City/State/Zip _____	Service Unit _____	

About the Trip:

Date & Time _____

Destination _____

Mode of Transportation _____

of Girls _____ # of Adults _____ # of non-members _____
(unregistered adults or children)

Briefly Describe Activities:

Budget: (Cost of transportation, food, event fee, lodging, etc.)
 Complete this section ONLY for activities which cost over \$50 per girl or for trips longer than 2 nights.

Total cost \$ _____ Per girl cost \$ _____

Money-Earning Activities (please describe) _____ Approved?
 _____ o Yes o No
 _____ o Yes o No

Amount earned \$ _____

Balance Secured Through:

Check forms that have been completed:
 (NOTE: not all of these may be required for your trip/activity)

Annual Permission Forms Behavior contracts
 Parent Permission Forms Rental Agreements
 Girl Health History Forms Contract with Facility/Vendor
 Adult Health History Forms Other: _____
 Non-member insurance _____
 Extended trip insurance _____

Check procedures which have been followed:

A copy of the troop/group roster has been provided to the troop/group emergency contact person.

The name of the troop/group emergency contact person has been provided to the service unit.

All trip adults are aware of the emergency procedures and have council emergency contact information.

Reference pages 14 and/or 76 of the [Council Resource Guide](#) to determine if activity is council approved.

If activity is High Risk, is it on the [high risk approval list](#).

Special Requirements:

First Aider Required? o Yes o No

If Yes, Name of Certified First Aider _____ Date of Certificate Expiration _____

o Other special adult training or certification needed (Troop Camping Certification, lifeguards, etc)? If so, please provide name, certification information and training dates (use another sheet, if needed).

Note: Please refer to the [Safety Activity Checkpoints](#) online to determine if a first aider needs to be present for troop/group events.

Emergency Contact Information:

At Home Emergency Contact Name _____

Phone # _____ E-mail _____

