



INSURANCE ORDER FORM FOR GIRL SCOUT ACTIVITIES

Refer to insurance and trip sections in *Volunteer Essentials* before completing this form. Submit this completed form to the Council office along with a check made payable to GSCCC at least **TWO WEEKS PRIOR TO ACTIVITY**. A copy of your trip/activity approval needs to be on file in the Council office. Requests will not be processed without trip/activity approval.

Minimum order is \$5.

SECTION I

Name of Adult in Charge _____ Email _____
Phone (Day) _____ (Night) _____ Troop# _____ Service Unit _____
Street Address _____
City _____ State _____ Zip _____

SECTION II - Type of insurance. Select a plan for this activity.

- Plan 2 Cost is 11 cents per person per day.
- Plan 3E Cost is 29 cents per person per day.
- Plan 3P Cost is 70 cents per person per day.
- Plan 3PI Cost is \$1.17 per person per day (international trips only; attach roster of trip participants).

SECTION III - Dates, location and type of activity.

Trip destination(s) _____ City _____ State _____
OR International trip destination(s) _____ Country _____
Activities to be conducted _____
Trip/activity start date _____ end date _____ Total number of calendar days _____ (include all partial days)

SECTION IV - People attending trip/activity.

List troop numbers of all girls participating in this activity:

- A. Number of registered Girl Scout girls in above troop(s) participating in trip/activity. _____
- B. Number of registered Girl Scout adults in above troop(s) participating in trip/activity. _____
- C. Number of non-registered children participating in trip/activity. _____
- D. Number of non-registered adults participating in trip/activity. _____
- E. Total persons (A + B + C + D) _____

SECTION V - Computing fee for insurance.

Total persons (Section IV, Line E) _____ **X** Total calendar days (Section III) _____ = _____ Total participant days
Total participant days _____ **X** Cost of plan ordered (Section II) _____ = \$ _____ **Total cost of insurance**

My check made payable to GSCCC for the premium is attached. My signature indicates that this trip/activity has been approved by the appropriate volunteer and/or GSCCC staff member as required by **Volunteer Essentials**.

Signature _____ Date _____