

National/International Trip Approval Form

Use this form for:

- Any **overnight** trip outside of the Council region. The GSCCC region includes Alabama, Delaware, Washington D.C., Florida, Georgia, Kentucky, Maryland, Mississippi, North Carolina, South Carolina, Tennessee, Virginia and West Virginia. Submit this form no less than **one month** before departure to the service unit program consultant*.
- Any **international** trip. Submit this form no less than **one year** before departure to the service unit program consultant*.
- Any trip that lasts **six nights** or more within the Council region.

*Upon initial endorsement by the service unit program consultant, this form is to be submitted to the Council at customercare@gscgcc.org for final approval.

Service Unit # _____ Troop/Group # _____ Girl Scout Level: Brownie Junior Cadette Senior Ambassador
 Leader/Advisor Name _____ Email _____
 Day Phone (_____) _____ Evening Phone (_____) _____
 Street Address _____ City _____ State _____ Zip _____
 Trip Start Date (MM/DD/YYYY) _____ Return Date (MM/DD/YYYY) _____ # Nights _____
 Trip Destination(s) _____
 Emergency Contact Name _____ Phone (_____) _____

Types of Accommodations (check all that apply).

<input type="checkbox"/> Private Camp	<input type="checkbox"/> Girl Scout Camp/Program Center	<table border="1"> <tr> <th colspan="2"># of Trip Attendees</th> </tr> <tr> <td></td> <td>Registered Girls</td> </tr> <tr> <td></td> <td>Registered Adults</td> </tr> </table>	# of Trip Attendees			Registered Girls		Registered Adults
# of Trip Attendees								
	Registered Girls							
	Registered Adults							
<input type="checkbox"/> Public Camp	<input type="checkbox"/> Home Hospitality							
<input type="checkbox"/> Rental Property (cabin, beach house, etc.)	<input type="checkbox"/> Youth Hostel							
<input type="checkbox"/> Government Facility	<input type="checkbox"/> Hotel/Motel							
<input type="checkbox"/> Other (please list):								

Certified Adults in Attendance

Provide the name of the adult who will be attending the trip who has taken the following trainings.

Girl Scouting 101, Out & About, Girl Scout Program Basics, Risk Management, Getting Your Troop Started	
Outdoor I and/or Outdoor II (if camping)	
First-Aid:	
Type of First-Aid Certification Exp. Date:	
Type of CPR Certification Exp. Date:	

Transportation (check all that apply). Note: All chartered/borrowed vehicles require a certificate of insurance.

<input type="checkbox"/> Private Passenger Vehicle	<input type="checkbox"/> Rental/Charter (provide name of company for each used)
<input type="checkbox"/> Public Transportation	Bus:
<input type="checkbox"/> Public Ferry/Watercraft	Car:
<input type="checkbox"/> Plane	Van:
<input type="checkbox"/> Train	

Activities to be Conducted (check all that apply).

Send any contracts or liability waivers/awareness of risk forms to the Council's Retention team for review. Review and follow *Safety Activity Checkpoints* for each activity.

<input type="checkbox"/> Backpacking	<input type="checkbox"/> Climbing/Rappelling	<input type="checkbox"/> High/Low Ropes Course/Challenge Course
<input type="checkbox"/> Hayride	<input type="checkbox"/> Snow Skiing/Snowboarding	<input type="checkbox"/> Ice Skating/Roller Skating
<input type="checkbox"/> Horseback Riding	<input type="checkbox"/> Water Skiing	<input type="checkbox"/> Theme Park/Water Park
<input type="checkbox"/> Caving	<input type="checkbox"/> Archery	<input type="checkbox"/> Other (please list):

Swimming (check all that apply).

<input type="checkbox"/> In a Backyard Pool	<input type="checkbox"/> In Hotel/Cruise Ship Pool	<input type="checkbox"/> In Open Water
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Boating (check all that apply).

Craft Type:	<input type="checkbox"/> Raft	<input type="checkbox"/> Canoe	<input type="checkbox"/> Kayak	<input type="checkbox"/> Sailboat	<input type="checkbox"/> Sailboard	<input type="checkbox"/> Tube	<input type="checkbox"/> Rowboat
Water Type:	<input type="checkbox"/> Flatwater	<input type="checkbox"/> Moving Water	<input type="checkbox"/> Whitewater	<input type="checkbox"/> Ocean/Bay			

Certified/qualified adults who will be supervising the checked activities above.

Activity	Certified/Qualified Adult Name	Type of Certification	Expiration Date

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Check here if any activities will be conducted through contracting an individual or company providing equipment, instructors, supervision or program (e.g., guides, outfitters, touring company, livery, rental agency, etc.) A certificate of insurance is to be obtained for each company at least two weeks prior to trip.
Specify activities and name of contracted individual/company: _____

Budget

Income		Expense	
Troop Treasury	\$	Transportation	\$
Fall Product Sale	\$	Girl/Adult Insurance	\$
Cookie Sale	\$	Accommodations	\$
From Caregivers	\$	Entertainment (tickets, etc.)	\$
Money Earning Activity #1	\$	Food/Meals	\$
Money Earning Activity #2	\$	Emergency Money	\$
Other*	\$	Spending Money	\$
Total Income	\$	Other*	\$
		Total Expense	\$
Total Cost per Girl		Cost per Girl that Family Pays	\$
Total Cost per Adult		Cost per Adult that Adult Pays	\$

*Describe "other" expenses and income. _____

How are you ensuring this trip is affordable to all girls in the troop/group? _____

Checklist for Trip Approval

- Participant list (submit along with this form).
- Detailed trip itinerary (submit along with this form).
- [Insurance Order form](#) and payment (submit along with trip approval confirmation at least two weeks prior to trip).
- Copy of rental agreement or vehicle rental receipt for hired vehicles and other contracts/agreements (if applies to your trip).
- [Certificate of Insurance Request form](#) or copies of certificate of insurance (if applies to your trip).

Agreement

I am aware of applicable Girl Scouts of the Colonial Coast and GSUSA policies, standards and procedures found in current versions of *Safety Activity Checkpoints*, *Volunteer Essentials* and *Girl Scouts of the Colonial Coast [National/International Trip Packet](#)* and agree to follow them.

Signature of Troop/Trip Leader _____ Date _____

Trip Endorsement and Approval

Service Unit Program Consultant – provides initial endorsement of national/international trips.

Endorsed Not Endorsed

Comments: _____

Date emailed to the Council at customercare@gscoc.org for final approval. _____

Signature _____ Date _____

Council Use Only – provides final approval for national/international trips.

Approved Not Approved

Comments: _____

Date emailed approval status to troop/trip leader and service unit program consultant. _____

Date recorded in National/International Trip spreadsheet. _____

Staff signature _____ Date _____