



# Membership Dues Summary

Please complete this form and attach payment for the total amount of dues and completed member registration forms. Please be sure to note any additional payments or contributions in the space provided below and return to your local council representative or mail to 5217 N Dixie, Odessa, TX 79762

**Girl Scouts®**

**Membership through 9/30/10**

**Complete (if known)**

Council Code \_\_\_\_\_ Troop Number \_\_\_\_\_ Report Code \_\_\_\_\_ Registration Area \_\_\_\_\_  
 New Memberships \_\_\_\_\_  Reregistering \_\_\_\_\_

**Check the one term that best describes the primary way in which these girls participate:**

- Troop                       Interest Group                       Program Center/Facility                       In School
- Event                       Camp                       Individual                       Other

**Program duration: (check one)**

- 8-12 months       4-7 months       1-3 months       1-4 weeks       6 days or less

**Program frequency: (check one)**

- Daily                       Weekly                       Every Other Week                       Monthly                       1-3 times Annually

**Please check one grade level that represents the majority of the girls that are registering now.**

- K-grade 1 (Daisy)       grade 2-3 (Brownie)       grade 4-5 (Junior)       grade 6-8 (Cadette)
- Grade 9-10 (Senior)       grade 11-12(Ambassador)

**Type of meeting place: (check one)**

- 1. Public Facility                       2. Home                       3. School                       4. Religious Building
- 5. Other Organization Facility       6. Council Facility                       7. Other

**Meeting day and location**

Day \_\_\_\_\_ Time \_\_\_\_\_

Name of Meeting Place \_\_\_\_\_

Address \_\_\_\_\_

Number of girl registrations attached _____	Total registrations at \$12	\$	_____
Number of adult registrations attached _____	Total amount of dues attached	\$	_____
	Contributions received	\$	_____
	Other	\$	_____
	Total	\$	_____

Position (check one)  
 Volunteer Leader/Adviser       Council Staff

Name \_\_\_\_\_

Address \_\_\_\_\_

ID Number \_\_\_\_\_ Telephone Number \_\_\_\_\_