

Girl Scouts of the Permian Basin
CONTACT FORM for Troop Tripping / Basic Overnight / Troop Camping

please print legibly and fill out completely

Refer to **Leader's Manual** for council guidelines prior to completing this form.

CAMP MITRE PEAK: submit form to camp office no less than 3 weeks prior to trip or reservation can be canceled without notice

ALL OTHER TRIPS: submit form to community services director no less than 6 weeks prior to trip.

INFORMATION of TROOP / GROUP:

Contact Name: _____ Troop #: _____

Mailing Address: _____

City, State & Zip: _____

Daytime Phone: _____ Evening Phone: _____

TRIP INFORMATION:

Name of Facility (include city & state): _____

Trip dates are from _____, 20____ through _____, 20____

Estimated arrival time at destination will be _____ am / pm

Estimated departure time from destination will be _____ am / pm

VEHICLE INFORMATION used to transport:

NAME (<i>last, first</i>)	DL # & STATE	VEHICLE MAKE & MODEL	VEHICLE LICENSE
1.			
2.			
3.			
4.			
5.			

PROPOSED ROUTE TO and FROM destination:

REQUIRED TRAINING INFORMATION:

TRAINING	EXP DATE	NAME (<i>last, first</i>)	TRAINING	EXP DATE	NAME (<i>last, first</i>)
First Aid & CPR			Adventure Challenge		
Lifeguard			Troop Camp Certification		
Troop Travel Training			Advanced Camp Certification		

EMERGENCY HOME CONTACT PERSON:

Name: _____ Phone: _____

LIST of YOUTH ATTENDING:

NAME (last, first)	F/M	AGE	ADDRESS	PHONE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

LIST of ADULTS ATTENDING:

NAME (first, last)	F/M	ADDRESS	PHONE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			