



GIRL SCOUTS OF THE PERMIAN BASIN

TROOP TRIP EVALUATION

TRIP DATES	TROOP #	AGE LEVEL	SERVICE UNIT

ATTENDANCE	GIRLS	ADULTS	OTHERS

Total Trip Cost \$ _____

Amount of Troop Money \$ _____

Amount each Girl contributed \$ _____

Troop destination: _____

Troop lodging: _____

Comment on location: _____

Event most enjoyed by girls: _____

Suggestions for improvement: _____

Accidents or illnesses requiring more than simple first aid: _____

New skills learned: _____

Did you complete a Service Project Record form? (this form can be found in the council resource file and should be given to your community services director.)

Signature: _____