



### Paperwork and Training Necessities for Troop Activities

Service Unit Activity Consultant (AC) reviews the activities of the troops in the service unit. This volunteer is a safety advisor who may consult council staff to answer your unique safety questions. Your AC keeps copies of permission slips and tracks adult training records to help verify that your troop has the necessary experience, progression and training to participate in chosen activities. The AC will keep your Activity Approval Form and notify you if the activity is approved or not.

Training responsibilities can be shared within a troop, but the appropriately trained adult needs to be present. Higher trainings than those listed here may be required (for example, a Lifeguard during swimming activities). Find the list of training available and upcoming dates at <a href="https://www.sdgirlscouts.org/training">www.sdgirlscouts.org/training</a>. Follow the general guidelines in Volunteer Essentials, as well as specific guidelines in the appropriate Safety Activity Checkpoints (SAC, found at <a href="https://www.sdgirlscouts.org/safety">www.sdgirlscouts.org/safety</a>). If no Safety Activity Checkpoints are listed for your activity, contact your AC or the adult learning manager at (619) 610-0814

#### **Troop Meetings**

Leader has completed Core Leadership Training, Welcome Meeting and Appropriate Age Level Training and has read <u>Volunteer Essentials</u> (especially Chapter 4: Safety-Wise)

#### In Leader Notebook:

- √ Parent Guardian Information\* & Girl/Adult Health Histories\*
  - Permission to Give Over-the-Counter-Medication\*
- Transporting Girl Scouts' form roleman substantial
  - In-Town Contact list of emergency phone numbers including Council Emergency Contact Info: (800) 643-4798. After hours please call (866) 361-2327
- Accident/Incident Report Form\* (blank)

#### **Local Field Trip**

- · First Aid and CPR trained adult as noted in SAC
- · Permission Slip\* for each girl (sample copy sent to AC)
- No Activity Approval\* needed (unless any specific activities require approval--see list on reverse)

#### Day Trip: Out of Council

- First Aid and CPR trained adult
- Permission Slips\*
- Safety Management Plan\*
- Activity Approval Form\* to AC (due one month prior to outing)
- Additional Insurance required (due one week prior to cuting; see www.sdgirlscouts.org/insurance)

#### **Troop Overnights/Sleepovers**

- · First Aid and CPR trained adult
- Let's Camp trained adult (if girls do not cook)
- · Let's Cook trained adult (if girls cook)
- Permission Slips\*
- Safety Management Plan\*
- Activity Approval\* Form to AC

## Encampments & Adventure Weekends (food and activities provided)

- · First Aid and CPR trained adult
- · Let's Camp trained adult
- Permission Slips\*
- Activity Approval\* Form
- Other items requested by the encampment director

#### **Troop Tent Camping**

- · First Aid and CPR trained adult
- · Let's Camp trained adult
- · Let's Cook trained adult
- · Let's Tent trained adult
- Permission Slips\*
- Safety Management Plan\*
- Activity Approval\* to AC

#### ✓ Overnight: Out of Council

- First Aid and CPR trained adult
- Let's Camp trained adult (if tent camping or girls are cooking, Let's Cook and Let's Tent may also be required)
- Permission Slips\*
- Safety Management Plan\*
- Activity Approval\* Form to AC (check "Out of Council" and appropriate "Group Camping" or "Travel" boxes)
- · Additional Insurance required

#### **Trips and Travel**

- Troop Tripping trained adult for advanced travel. Consult the council booklet Let's Go!\* for Trip and Travel planning, training and other requirements. Contact your AC or the adult learning manager at (619) 610-0814.
- See local and national resources at <u>www.sdgirlscouts.org/travel</u>
- Extended trips of over 3 nights or involving air travel should begin the approval process 12 months prior to departure, 18 months for international trips.

#### **Signed Agreements and Contracts**

Troop adults have the authority to sign agreements for use of facilities or activities if the total amount of contract is \$500 or less. Council approval is required for any contract naming "Girl Scouts" if more than \$500.

#### Note About Insurance:

Girl Scout membership includes accident insurance for activities in council boundaries which are less than 3 nights. Additional insurance is required for non-member participation, events out of council boundaries, or for extended events. See <a href="https://www.sdgirlscouts.org/insurance">www.sdgirlscouts.org/insurance</a>.

<sup>\*</sup>Forms are all available on the San Diego Girl Scout website at www.sdgirlscouts.org/forms.

4:58 PM 01/11/18 Accrual Basis

# Girl Scout Troop Transaction Detail By Account All Transactions

Туре	Date	Name	Memo	Debit
Meetings, Acti Joshua Tre	•			
Check	10/30/2015	Girl Scouts	Insurance	37.80
Check	11/11/2015	Walmart	Food	68.38
Credit C	11/11/2015	Costco	Food	142.50
Credit C	11/14/2015	Harmony Hospitality	Lodging	850.20
Check	11/16/2015	Coyote Corner	Patches	85.54
Check	11/16/2015	Joshua Tree Nation	Park entrance fee	40.00
Check	11/16/2015	Joshua Tree Nation	Park entrance fee	20.00
Total Joshu	a Tree		-	1,244.42
Total Meetings,	, Activities, Eve	nts	. <u> </u>	1,244.42
TAL				1,244.42

## Joshua Tree Itinerary

Directions and Maps Attached

#### Itinerary

Friday November 13, 2015 – Meet at Parkway Middle School at 5:30 pm

Travel to Harmony Motel 3 hours

Snack, settle in, bed time 10:00 pm

Saturday November 14, 2015

7:00 - 9:00 am wake up, breakfast, pack for the day

9:00 - 5:00 pm Joshua Tree National Park See map for general travel plans.

5:00 – 10:00 pm Harmony Motel Dinner, game night, stargazing, optional Sky's the Limit Observatory

Sunday November 15, 2015

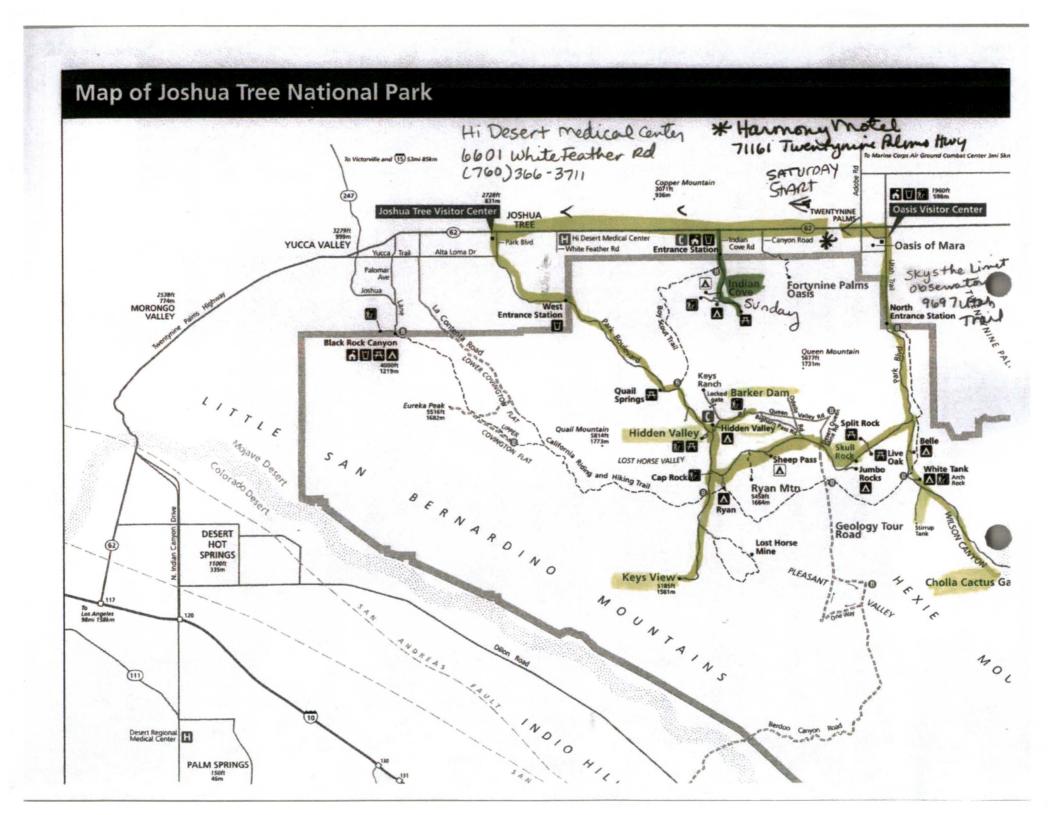
7:00-9:00 wake up, breakfast, pack for day

9:00 – 11:30 Indian Cove, Scouts Own

11:30 – 12:30 lunch

12:30 - 3:30 Travel home

3:30 Pick up at Parkway Middle School



Tel: (760) 367-3351 Reservations: (760) 401-1309

info@harmonymotel.com

Select Language ▼

71161 29 Palms Twentynine Palms, California 92277 USA



HOME OVERVIEW GUEST ROOMS INNSIGHTS GALLERY DESTINATION DIRECTIONS CONTACT US MEET THE OWNER BLOG

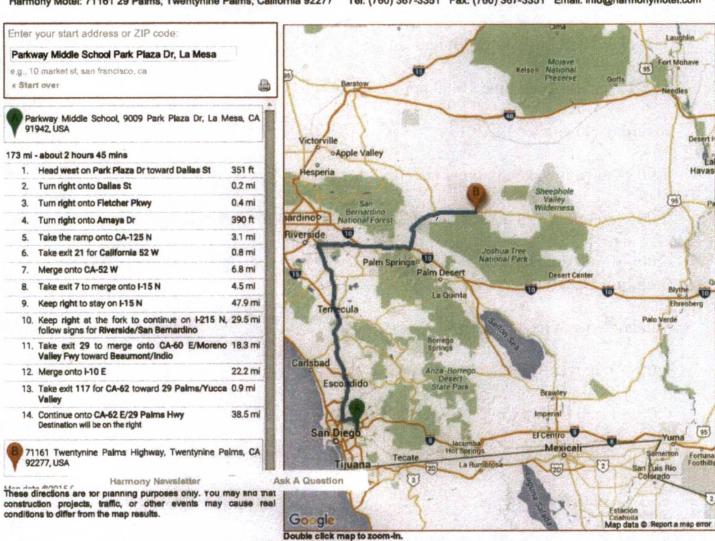
RESERVATIONS

Home

Directions

#### Twentynine Palms Hotel Directions - Harmony Motel

Harmony Motel: 71161 29 Palms, Twentynine Palms, California 92277 Tel: (760) 367-3351 Fax: (760) 367-3351 Email: info@harmonymotel.com



Welcome to The Harmony Motel Hotels. Stay with usi Book it Now!

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## **ACTIVITY APPROVAL FORM**

(view a sample at www.sdgirlscouts.org/safety)

Check all activities you will do during this outing. Click the links to review Safety Activity	4 Safety-Wise. For the "higl	riority! Always follow general safety guideling h risk" activities at left, follow the Safety Activy. y. Submit this form to your activity consultang	ity Checkpoints (SACs), f	ound at
Checkpoints (SACs).		-	_	_
Archery	Troop Number	# of girls attending 10# of adults	: female 5 ma	ale <u>1</u>
I Backpacking	Service Unit 688	Program age level(s): Daisy B	rownie ∐Jr [✓]Cad [_	Sr [ Amb
Bicycling		to 11/15/15 Total cost for all participants	\$ 1,500	
Canoeing	Location Joshua Tree National Average participant's skill		diate Experienced	1
Caving		Troop/Group ☐Individual Girls ☑Familie		
Challenge Courses (includes	This solitary is open to	Tuopiologi Cilidividas Cilia Eli attilie	PEROPERTINES FERRISHED	Community
Ziplining)		equipment and clothing for the activity, su		flotation
✓ Climbing or Rappelling ✓ Contract over \$500		n a ⅓" heel. What specialized gear is need	ed for your activity?	
	Comfortable walkin	g shoes, layered clothes	<del> · · · · · · · · · · · · · · · · · </del>	
Cross-Country Skiing Downhill Skiing or	<u></u>			
Snowboarding	Safety Management Risi	···		
Fencing	First, identify dangers in ye		Third, if those dange	ers do
i Group Camping-lodge, home	activity. What are three ris		occur, what actions	will
Group Camping-tent or rustic	that could happen?	(See the SACs for hints)	lessen the impact?	-
Horseback Riding	<sup>1</sup> Falling down	Proper supervision	🕈 Proper tra	ainina
lce Skating	2_		, , , , , , , , , , , , , , , , , , , ,	9
in-line or Roller Skating	Getting Lost	🖙 Travel Plan 🕨	Appropriate i	olanning
I Indoor Skydiving	3	<u> </u>		
Kayaking	" Drowning	🕶 Lifeguard I	Supervision over v	vater activity
✓ Out-of-Council Area				
Outdoor Cooking	Insurance Matters!	-		
Rowboating		endors and venues to carry liability insurance		
Sailing		surance. If your vendor or venue is not listed. have insurance on file with council? Yes	arrange for a certificate to	be sent.
SCUBA Diving	Does your veridon/veride	Have Highlance on the wift Controlls Les	•	
Skateboarding	Your event may require a	additional insurance if you will leave council t	oundaries, include non-G	irl Scout
Sledding, Toboganning or Snow Tubing		nan two nights. Coverage and information an		
Snorkeling	www.sdgirlscouts.org/ins	surance. Have you assessed the need for ad-	ditional insurance? Not nee	eded
☐ Stand-Up Paddleboarding	if first sider liferward or	ertified instructor, camping qualified ac	luit ata will ba wiliwaa	l liet the
Surfing	nerson and describe the	eithed instructor, camping quained ac ir qualifications, documented experien	re etc., will be utilized ce etc Check SACs fo	r, list tile r
∠ Swimming	requirements.	- quantitation of a continuition expenses	pe, etc. ottook ones to	•
✓ Travel (see Let's Go!)	Person	Certification, training or ex	pertise	Expiration
Trip/Travel Camping	reisuii	(CPR, 1st Aid, Let's Camp, Backpack Instruc	tor, Troop Tripping, etc)	Date
Tubing (river floating)	У	CPR, First Aid, Let's camp/cook/tent/	troop travel, lifeguard	10/18
Waterskiing or Wakeboarding		CDD First Aid Latie on	mploookitont	
White Water Rafting	Control of the contro	CPR, First Aid, Let's ca	mp/cook/tent	
Windsurfing	A - the anticity feeder 1 the	marketi - DM (lateria) (lateria) (lateria)	et de l'Objection de la designation de	
Other:	As the activity leader, I confirm	m that: RM (initials) I will follow Safety Ac		
Why don't I see our activity?	•	RM (initials) I have/will collected h		
Some activities, like simple field trips, are low-risk and do not require approval.		RM (initials) The activity is approp		skill level,
2) The activity is rare or new, and no		experience and their physica	l and emotional condition	
checkpoints are written, Contact AC.	Submitted by	Phone Charles	E-mail	
Other activities require special council approval or are NEVER		AC more about your trip: sample permission for		ant near list
approved. See Volunteer Essentials		r agreement/contract over \$500 naming Girl Sc		ury, your not,
Chapter 4 for a current listing.		Approved? A		
Still not sure? Ask your activity consultant for				
guidance.				SS:mlm:cc

MUTUAL OF OMAHA INSURANCE COMPANY SPECIAL RISK PREMIUM DEPARTMENT P O BOX 31716 OMAHA, NE 68131 800-524-2324 girlscouts@mutualofomaha.com

#### **STATEMENT**



GIRL SCOUTS, SAN DIEGO-IMPERIAL

Date:

10/28/2015

COUNCIL, INC.

**Invoice Number:** 

68169

1231 UPAS STREET

Council Number:

623

SAN DIEGO, CA 92103

PLAN 3P

Event Name and Location	Begin Date	End Date	Number of Participants	Premium Amount	
TROOP JOSHUA TREE NATIONAL PARK	11/13/2015	11/15/2015	18	37.80	
		-	Total:	37.80	
Total Amount Due:	37.80				
Amount Paid:	37.80				
Balance Due:	0.00				

Your account will be debited for the Total Amount due within two business days.

Coverage is not in effect unless full premium payment is received. (ACH funds are received by Mutual Of Omaha.)

Mutual of Omaha Special Risk Premium Dept PO Box 31716 Omaha, NE 68131

Thank you for submitting your event enrollment. If you have any questions, please call us at 1-800-524-2324.



Underwritten by United of Omaha Life Insurance Company.

Subj:

Re: Group reservation Nov 13-15

Date:

8/5/2015 1:15:54 P.M. Pacific Daylight Time

From: To:

info@harmonymotel.com

Hid

mony Motel 71161 Twenty Nine Pulma Huy Twenty Mine Pulms, CA 92277

Your resveration is confirmed for the check in date 11/13/15 and check out is for 11/15/15. You have resvered 3 rooms with two full beds at the rate of \$95.00 plus taxes per night for 4 occupants per room. One room with two full beds and a kitchen at \$105.00 plus taxes per night ( for 4 occupants) and the cabin at \$105.00 plus taxes for 4. Check in time is from 3pm to 9.30pm and check out time is at 11am. Since you are making a block booking of 75% of the rooms and you are booking almost 3 months in advance 50% of your payment is non-refundable (any cancellation between now and the 7th of November will lead to a cancellation fee of 50% any cancellation after the 7th of November to the day of arrival will lead to a 100% of your stay in cancellation fee). Please note that this is a small motel of 8 rooms only, (and we have limited room types, once we take a confirmed reservation such as this, we close out these rooms for these dates as sold

Please note that all our rooms are non-smoking and no pets are allowed.

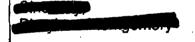
If you have any questions or concerns please call Ash at 760-401-1309.

We look forward to meeting you and your party.

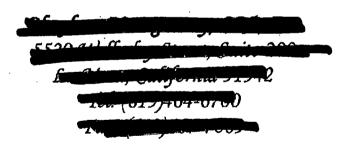
On August 5, 2015 at 12:44 PM RhayleneM@aol.com wrote:

Hi Ash:

Just checking on this reservation. Please let me know if you need anything else.



for the next three months).



In a message dated 8/3/2015 10:52:04 A.M. Pacific Daylight Time, I



Hi Ash:

We are reserving 3 double rooms, 1 double room with kitchen and Cabin (3\*\$95 & 2\*\$105) for November 13-15.





### **Permission Form**

Dear Parent/guardian:	ional Park
Troop/group # 6033 is planning to go to Joshua Tree Nati	
Dates(s) Friday- Sunday November 13-15, 2015 Time	Friday @ 5:30 pm - Sunday @ 3:30 pm
	number(
Arrangements for transportation: Parkway Middle School Friday	
Time and place of return Parkway Middle School Sunday @ 3:	30 pm
Method of transportation Automobile	,
Leaders accompanying the girls:	
Activities will be staying in a hotel (shared accommodations), swim	nming, visiting Joshua Tree National Park, stargazing
Expenses Money for visitors center	
Equipment and clothing Comfortable clothes and shoes for wall	king, swimsuit
In case of unusual circumstances (major delays, etc.), the leader will call:	
Name n/a Ph who will then contact the parents.	one number ()
	(Coro, coo coo)
Leader	Phone number
Detach and return the bottom portion	to leader by
Only girls with a signed permission	
My daughter	has permission to
participate in Harmony Motel Joshua Tree National Park	Date 11/13-15/15 5:30 pm to 3:30 pm
The following information is provided so that the adult in charge may contact a re	
	(
Parent/guardian	Phone(s)
	( )
Parent/guardian	Phone(s)
Responsible person other than the above/relationship	Phone(s)
	(
Doctor	Phone
My daughter is in good health and may engage in all activities [ ] yes [ ] no. If	no, list any exceptions
In an emergency situation, an emergency medical technician may need to know	w the following information regarding my daughter's health (e.g.,
allergies, chronic illnesses, seizures, etc.)	
Date of last tetanus shot	
I give my permission for the adult in charge to take my child to a medical facility contacted, I consent to treatment for my daughter under the supervision of and a Practice Act. This provides authority pursuant to Section 25.8 of the California C	as deemed advisable by a physician licensed under the Medicine
Parent or guardian's signature	Date





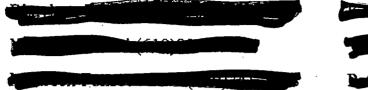
Pare	nt/Guardian	Worl	Phone ()	
Signature			Date	
	-0			
Medication:	Instruct	ions for use:		
She will be bringing the f	ollowing medi	cations with her:		
or others (please list):				
sickness)	Yes	No <sup>.</sup>	Other:	
for abrasions  Dramamine (for motion	Yes	No	Other:	
Neosporin or Mycitracin				
(Advil or Nuprin)				
for allergies  Ibuprophen	Yes	No No	Othor	
or Chlorinephrine			<b></b>	
Benadryl	Yes	No	Other:	
Sudafed	Yes	No	Other:	
Tums	Yes	No	Other:	



Girl:	Weather:
Refillable water bottle- this wil	hikes or moving from different types of activities ll be used daily and is important!
Sunscreen, chapstick	dala) aturdu far hilring
1 Pair closed toe shoes (no sand Flashlight	uais) startey for mixing.
Mess kit if they have one	
Spending Money: \$	<del></del>
Clothes:	
Pajamas	
Pants/jeans	
Shorts	
•	-2 long sleeve- it's great to be able to layer)
1 Sweatshirt or sweater/jacket	
1 Hat or beanie	
1 Swimsuit	ow cour stout
Socks & Underwear (enough for 1 Pair closed toe shoes (no sand	
Flip flops	uais) sturdy for finking.
The hops	
	showers, toothbrush & toothpaste, hairbrush and/or (in plastic container), sunscreen, chapstick
como, snampoo ee conditioner	(in plustic container), sunscreen, enapstick
<b>Optional Items May Include:</b>	<b>:</b>
<del>-</del>	comfortable sharing a bed with another girl)
Phone/camera	
MY TO DO LIST:	
Permission Slip	SWAPS (18)

#### Joshua Tree Adventure 2015

#### **Emergency Action Plan**





Cell phones do not work in many parts of the park so if you need to leave us a message we will receive it when we get back to service. As always if an emergency occurs we will let you know as soon as possible.

Harmony Motel Owner: Ash (760) 367-3351 <u>harmonymotel.com</u>

71161 Twentynine Palms Highway, Twentynine Palms, CA 92277

#### Joshua Tree National Park

Emergency dial 911 or (909)383-5651

IN CASE OF EMERGENCY Emergency phones are found at two locations: • Indian Cove Ranger Station • Intersection Rock parking area near Hidden Valley Campground

Closest Emergency Medical Center Hi Desert Medical Center (760)366-3711 6601 White Feather Road, Joshua Tree, CA 92252

Nearby Ranger Stations:

Park information: (760)367-5500

Joshua Tree Visitor Center 6554 Park Blvd, Joshua Tree, CA 92252 Hours 8:00 am to 5:00 pm

Oasis Visitor Center 74485 National Park Drive, Twentynine Palms, CA 92277 Hours 8:00 am to 5:00 pm

Directions and Maps Attached

Girl Scouts Council Emergency Contact: (800)643-4798 or (619)298-8391 After hours (866)361-2327 In Town Contact:



## Safety Management Plan for Troop Activity

Adult trip leader's name:		Troop number:	
Address:		Phone (day):	
City: Zip	0:	Phone (eve):(	
Number of girls participating: Age	level: <u>Cadettes</u>	<u>).</u>	
Number of adult females participating:	Number of adult males	participating:	
Council training taken: Let's Camp	Let's Cook	Let's Tent	Troop Tripping
Activity site: Harmony Motel	Address;		
Cross street: 71161 Twentynine Pal Twenty nine Palme, CA	ms hwy Phone # at sit	e:( <i>76</i> 0) 367-3	351
Twenty nine Palme, can Time and date of departure: 11/13/15 5:30	Time and date of return	1 11/15/15 3:3	ppm
Type of activities planned: Troop to			
Name of first aider:	Expiration dat	es: First Aid 10/2017	CPR 10/2017
List all forms of transportation to be used:	uto		
Drivers and vehicles to be used:			
Driver	Driver's license number	Make and model of vehicle	Vehicle license number
Driver			
Driver			
Driver	number	of vehicle	
Driver		of vehicle	

## **Emergency Numbers**

Site Contact Name:	Phone Number: (
Fire Department: 6560 Adobe Rd 29 Palms	Phone Number: (760) 367-7524
Police/Sheriff 63665 Twentynino Palms Hwy,	Phone Number: (760) 367-9546
Police/Sheriff. 63665 Twentynino Palms Hwy,  Joshua Tree  Nearest Emergency Medical Facility: Hi Desert Medical	(760)366-4175 Phone Number: (760) 366-3711
Address: 10001 White Feather Rd	City: Joshua Tree
In-town Contact:	Phone Number: (
Gir   Scouts (800) 643-4798 Safety Review	

In the boxes below indicate the safety points to be reviewed with all participants. Date and initial when done. Tip: Letting girls participate in developing the rules helps them in following those rules.

Means of transportation	Safety rules to be reviewed prior to departure	Date of completion
auto &	afetywise Chapter 4	

Planned activities	Safety rules to be reviewed prior to program activity	Date of completion
Visit	Staying together Walking feet Snakes / Spiders Pool/gacunggie - proper equipment	3
·		

Cooking  Hotel - adult Superorsion  11/6/1.  Sanitation	
	5
Sleeping follow Safetywise for sleeping 11/6/13 accommodations	5
Other	
Evacuation plan in case of fire (non-council site): The at post	
Emergency plan in case of a natural disaster (non-council site):	

Attach list of all participants and carry a copy of this on trip. Review the information with the girls and adults going on the trip.

Site hazards:

Your activity consultant can be a helpful resource person if you have questions on completing this form.



## **Accident/Incident Report Form**

If you are experiencing a life-threatening emergency, call 911. Girl Scouts' after hour's emergency hotline: (866) 361-2327

This form is used to report many kinds of action in the line of th	cal care esult in injury nogen sts, threats, etc.	Significant illness or all "Near miss" or narrowly Fire, natural disaster, d Any incident where sup	ergic reaction r-avoided accident langer from intruder port or follow-up are	-
Send this form immediately to: Girl Scouts to email accidentreporting@sdgirlscouts.org of form and send them together describing the	r fax (619) 298-2031. If	more than one person I	<b>—</b>	
Complete responses are necessary. Writ	e "n/a" if the question do	es not apply or "unkno	wn" if you don't have	the answer.
Person injured	Phor	ne ()	Cell () _	
Parent/guardian name(s)		Email		
Parent/guardian name(s) Address	Ci	ty	State	Zip
Is the injured person a (check all that apply ☐ Adult volunteer ☐ Paid staff member If a Girl Scout youth, which program age le	☐ Other adult participa vel? (circle) Daisy	int   Registered Girl  Brownie Junior	Scout GSUSA ID a Cadette Senior	#
Event date(s)	Event location			<del> </del>
Name of event				
Describe the activity   Troop Activity	Service Unit Event □ F	Resident Camp 🔲 🗅	ay Camp 🔲 Cou	ıncil Event 🛚 Other
Date of accident/incident			□ a.m. C	<b>□</b> p.m.
Location where accident/incident occurred	Specify location, including loa	cation of injured and witness	es. Use diagram or additi	onal sheet, if needed.)
Nature of injury (i.e., sprain) Emergency procedures followed at time of	accident/incident	Part of body	affected	
Did anyone witness the accident/incident?		·		
3				
Help others learn from this situation. What	could the injured person	have done to prevent t	he accident/incident	?

Medical Report of Accident/I	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
*	S □ No □ In writing □ I			
By whom?	Title	When?		
Parents' response				
Freatment given? If treatment	nt was provided by any licens	ed professional, note their full name and title.		
□ In Camp Health Center  Treatment given	By whom?	When?		
☐ Doctor Office Treatment given	By whom?		<del> </del>	
T At Hoonital - Name's		\Mhen?		
☐ At Hospital Name?	Ware narents present?	When? When?		
<ul><li>☐ In-patient ☐ Out-patient</li><li>Released to ☐ Parent ☐ `</li></ul>	Were parents present? Troop leader ☐ Camp/council	When?When?		
☐ In-patient ☐ Out-patient Released to ☐ Parent ☐ Comments (Attach additional shee	Were parents present? Troop leader ☐ Camp/council ts, as needed.)	☐ Yes ☐ No Date/time of release		
☐ In-patient ☐ Out-patient Released to ☐ Parent ☐  Comments (Attach additional shee)  Persons notified in addition to	Were parents present? Troop leader □ Camp/council ts, as needed.)	☐ Yes ☐ No Date/time of release		
☐ In-patient ☐ Out-patient Released to ☐ Parent ☐  Comments (Attach additional shee)  Persons notified in addition to	Were parents present? Troop leader □ Camp/council ts, as needed.)  parents	☐ Yes ☐ No Date/time of release		
☐ In-patient ☐ Out-patient Released to ☐ Parent ☐  Comments (Attach additional shee)  Persons notified in addition to  Describe any contact made with	Were parents present? Troop leader □ Camp/council ts, as needed.)  parents	☐ Yes ☐ No Date/time of release		
□ In-patient □ Out-patient Released to □ Parent □ Comments (Attach additional shee) Persons notified in addition to Describe any contact made with Was the council director of cor Important Attach the permissi	Were parents present?  Troop leader □ Camp/council  ts, as needed.)  parents  th/by media regarding this situate  mmunication notified? □ Yes	☐ Yes ☐ No Date/time of release		
☐ In-patient ☐ Out-patient Released to ☐ Parent ☐ Comments (Attach additional shee Persons notified in addition to  Describe any contact made with Was the council director of cor Important Attach the permissithe accident/incident. This w	Were parents present?  Troop leader	The staff of the s	ng day after	
☐ In-patient ☐ Out-patient Released to ☐ Parent ☐ ☐ Comments (Attach additional shee  Persons notified in addition to  Describe any contact made with Was the council director of cor  Important Attach the permissi the accident/incident. This w  Name of person filling out form Relationship	Were parents present? Troop leader □ Camp/council ts, as needed.)  parents  th/by media regarding this situate mmunication notified? □ Yes ion slip of the injured girl. Please iill help insure immediate attention Phone (	The staff of the s	ng day after	
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Girl Scouts San Diego 1231 Upas Street San Diego, CA 92103 (800) 643-4798

DATE \_\_\_\_

## Girl Scout Leader Tool Kit

First aid kit (check Safety Activity Checkpoints)
Permission slips and health history forms for each girl in the car she is riding in (including the ider's daughter or child)
Copies of passports and other critical documents (for international travel)
Adult Health History form for all adults (including the leader)
Extra beanie hats and fleece jackets
Accident Report form
Emergency contact phone numbers
Emergency procedures sheet and/or card
Change for telephones, tips, toll roads, etc.
Map of the areas you will be traveling; do not rely solely on GPS units or smart phones
All of your paperwork: reservations, confirmation numbers, lease agreements, etc.
Emergency "fix it" kit with safety pins, needle and thread, duct tape, scissors, pen and paper, c.
Ideas for travel games or activities to keep girls engaged
Trash bags: for litter, makeshift rain gear, storage, wet clothing, etc.; zip bags for motion sick- ss
Handi-wipes, tissues and/or paper towels
Any girl's medications, instructions for dosage and signed permission to give edications  Idea!! Make up a manila envelope with all the paperwork that belongs in each car; it will fit in the glove compartment out of your way, but convenient in case you need it.

## 11 Steps to an Advanced Domestic Trip

### Begin at least 12 months prior to your departure date.

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	Vision & Purpose
	☐ Girls discuss trip, where, purpose, how to get there, etc.
	☐ Girls and leader consider options and decide on destination
	☐ Girls and leader discuss possible activities, costs, food and lodging
2	Money, Schedules & Responsibility
	☐ Girls and leader determine trip budget
	☐ Girls and leader set up a planning timeline
	☐ Begin fitting trip preparations into on-going troop activities
	Inform families with general information about the trip
<del></del>	Older girls should evaluate possible use of the troop ledger system
	Training & Safety Standards
2	Leader determines training needed
	<ul> <li>□ Money earning standards reviewed (see financial guidelines)</li> <li>□ Safety Activity Checkpoints consulted for safety requirements</li> </ul>
	☐ Safety Activity Checkpoints consulted for safety requirements ☐ Consult with the service unit activity consultant
•	Appropriate progression and skills practice evaluated and planned (integrate into meetings and field)
	trips)
	Clarify Details
	☐ Girls and leader refine purpose of trip, money earning projects, trip schedule, equipment needed,
	meals & snacks, personal packing list who will bring what, how troop will travel, etc.
5	Girl Scout Approval (six months in advance of the trip)  ☐ Submit Activity Approval form to the service unit activity consultant.
	☐ After approval begin confirmations and accumulation of the following:
	□ All paperwork in Step 8
	☐ Reservations for site and lodging ☐ Transportation details (Plane tickets, car reservation, train passes)
	Required Training
	One adult must complete Troop Tripping. The training is offered on a quarterly basis; plan ahead
	☐ All participants (girls and adults) are strongly encouraged to complete one of the following programs offered by Hostelling International: Girl Scout Travel 101, Cultural Kitchen Series or Travel Bug. For best
	impact, plan to complete the program six months before travel. Contact the program coordinator for current
	schedule: programs@sandiegohostels.org or (619) 338-9981, ext. 2
	Finalize Details
	☐ Leader and girls finalize itinerary and budget
	☐ Leader and ğirls complete safety and risk management planning ☐ Orient families of troop plans
4	☐ Leader and girls finalize itinerary and budget ☐ Leader and girls complete safety and risk management planning ☐ Orient families of troop plans ☐ Recruit & train the troop in-town contact (see In-Town Contact form)
	Paperwork and Logistics
	Permission slips signed
	Transportation confirmed (Public, private vehicles, commercial vendor)
	☐ Health histories collected ànd organized ☐ Safety and Risk Management Plan complete
	☐ Detailed itinerary complete
	□ Lodging confirmed □ Meals and snacks planned and purchased
	☐ Fees paid
	☐ Family Trip Orientation (Provide a contact packet for each family) ☐ Additional insurance purchased if required (see www.sdgirlscouts.org/insurance)
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	Confirm Details (three months in advance)  □ Submit samples of all paperwork from Step 8 to service unit activity consultant for final confirma-
	tion. (Please inform of any major changes prior to or during the trip.)
	☐ Finalize details with families ☐ Finalize details with in–town contact
	Travel Time
7/1	☐ Let's Go! Have a great time on your trip
	Debriefing & Record Keeping  ☐ Evaluate and debrief with the girls
	☐ Evaluate and debrief with the girls ☐ Evaluate and debrief with the adults who participated ☐ Evaluate and debrief with the families
	□ Evaluate and debrief with the families
	☐ Keep evaluation and debrief notes in troop records ☐ Complete Let's Go Budget Worksheet filed for the end-of-year financial report
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