

Single Use Permission Form

This form can be submitted to your troop leader for activities scheduled.

Girl Scout's Name: _____

First

Last

Troop Number: _____ **Service Unit:** _____

Name of Troop Leader: _____

First

Last

Email of Troop Leader: _____

Event/Activity: _____

Phone: _____ **Date:** _____

You have permission to administer the following medications to my Girl Scout:

- Tylenol
- Simple antacid
- Antihistamine
- Ibuprofen
- No, you do not have permission to administer any of these medications to my Girl Scout

During the activity, I may be reached at the following location:

Address: _____

Street

City

State

Zip

Cell Phone: _____

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Name: _____

First

Last

Relation to Girl Scout: _____

Address: _____
Street

City State Zip

Cell Phone: _____

The following adult(s) are permitted to pick-up my Girl Scout from this activity:

Name: _____
First Last

Relation to Girl Scout: _____

Cell Phone: _____

Name: _____
First Last

Relation to Girl Scout: _____

Cell Phone: _____

Permission*

I agree

My Girl Scout has permission to participate in the aforementioned event. She is in a good physical condition. If she has a complicating medical problem or has an serious illness or injury or an operation since her last health examination, I am submitting a written statement from her physician giving her permission to participate in this activity.

Terms/Agreement*

I agree

I understand it is my responsibility to provide transportation home, if for any reason, my child must be removed from any program activity due to illness, accident or disciplinary action. I give my daughter, named below, permission to participate in the activity described above. I fully understand that the activity has certain inherent risks that cannot be controlled by the facility owner/vendor or by Girl Scout Commonwealth Council of VA, Inc. If a waiver is required for the activity releasing an owner/vendor of liability, I release Girl Scout Commonwealth Council of VA, Inc., its staff, and volunteers from any responsibility or liability whatsoever for that activity. In the event legal action is taken against Girl Scout Commonwealth Council of VA, Inc. its staff, and volunteers, for any reason, other than the negligence of the aforesaid Girl Scout Commonwealth Council of VA, Inc., its staff and volunteers, then I agree to indemnify and hold harmless said Girl Scout Commonwealth Council of VA, Inc., its staff and volunteers from any and all liability that may be imposed for anything other than primary negligence.

Parent/Guardian Signature: _____

Date: _____

Email of Parent/Guardian: _____