



**Girl Scouts®**

Return to Troop Leader by: \_\_\_\_\_

## Permission Form

Girl Scouts Western Pennsylvania

My daughter, \_\_\_\_\_ has my permission to participate in the following activity:

**Activity:** \_\_\_\_\_

**Date and time of activity:** \_\_\_\_\_

**Location of activity:** \_\_\_\_\_

**Arrangements for transportation:**

Time and place of departure: \_\_\_\_\_

Time and place of return: \_\_\_\_\_

Mode of transportation: \_\_\_\_\_

Driver's name(s): \_\_\_\_\_

Who will pick up the child after the activity (name and relation):  
\_\_\_\_\_

**Items needed for the activity:**

\_\_\_\_\_  
\_\_\_\_\_

**Any serious health problems/allergies that would affect your daughter at this event/activity:** \_\_\_\_\_

\_\_\_\_\_

During the activity, I (we) can be reached at:

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Name: \_\_\_\_\_

Relation to participant: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_