

In addition to those noted previously, please list individuals who may be contacted in an emergency:

Name _____ Relationship _____

Telephone (day) _____ (eve.) _____

Name _____ Relationship _____

Telephone (day) _____ (eve.) _____

Please provide the following information about your child's doctor:

Name _____

Address _____ Telephone _____

Emergency release: Do you give permission for the adult in charge to take your child to a medical facility, if necessary? yes no If none of those identified previously can be contacted, do you consent to treatment for your daughter under the supervision of and as deemed advisable by a physician licensed under the Medicine Practice Act and pursuant to Section 25.8 of the California Civil Code? yes no

Publicity release: San Diego-Imperial Girl Scout Council frequently documents Girl Scout activities and events for public relations and promotional purposes. Do you give your permission for your daughter to be seen in photographs or other visual images used for these purposes? yes no

Are you willing to provide transportation for Girl Scouts in accordance with Girl Scout safety standards? yes no
If yes, please furnish the following information:

Driver's name _____ Telephone _____

Driver's license number _____ State _____ Type _____

Vehicle license _____ Model _____ Make _____ Year _____

Number of passenger seats with safety belts (excluding driver) _____

Insurance carrier* _____

Policy number* _____ Expiration date* _____

Availability _____

* or furnish proof of insurance or insurance certificate

I understand that all permissions, releases and authorizations given in this document are for the membership year beginning on Oct. 1, 200____, and ending Sept. 30, 200____. I understand that I am responsible for notifying the leader in writing of any changes in this information. I understand that additional permission forms may be required for special events and activities.

Signature _____ Date _____

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|---|--|--|
| <input type="checkbox"/> becoming an assistant troop or group leader | <input type="checkbox"/> serving as an emergency contact person for the troop or group | <input type="checkbox"/> keeping troop or group records |
| <input type="checkbox"/> serving as a troop/group cookie sale manager | <input type="checkbox"/> teaching a skill or craft | <input type="checkbox"/> providing childcare for the troop or group leader |
| <input type="checkbox"/> helping at troop or group meetings | _____ | <input type="checkbox"/> attending leader meetings when leader is unable to attend |
| <input type="checkbox"/> taking special training that will allow the troop or group to camp | <input type="checkbox"/> driving for field trips or outings | |
| | <input type="checkbox"/> making telephone calls | other _____ |