

Submit at least two months prior to departure to the service unit trip approval designee: Any **overnight** trip outside of the Council region* and any trip that lasts **3 nights without a holiday** or more within the Council region which includes DE, Washington DC, KY, MD, OH, PA, VA, and WV.

Submit at least one year before departure: Any international trip*.

*Upon initial endorsement by the service unit program consultant, this form is to be submitted to the Council by service unit trip approval designee to customercare@gscoc.org for final approval.

Service Unit # ____ Troop/Group # ____ GS Level: ☐ Daisy ☐ Brownie ☐ Junior ☐ Cadette ☐ Senior ☐ Ambassador

Participant Information: # Registered Girls ____ # Registered Adults ____

Leader/Advisor Name _____ Email _____

Phone (____) _____ Address _____

Trip Start Date (MM/DD/YYYY) _____ Start Time (AM/PM) _____

Trip Return Date (MM/DD/YYYY) _____ Return Time (AM/PM) _____ # Nights _____

Trip Destination(s) Location and Address _____

Emergency Contact Name _____ Phone (____) _____

Minimum of Two Certified Adults in Attendance

Provide the names of the adults who will be attending the trip who have taken the following:

Requirements			Name of Adult	
First adult who has completed all required training and is attending				
Second adult who has completed all required training and is attending				
Adult who has taken Outdoor I or Outdoor I and II (required for overnights). If N/A, check: ☐				
First-Aider (must be registered GS). ☐ Level 1 ☐ Level 2				
Type of First Aid CPR Certification		Expiration		

Trip Details

Provide your answers below.

List type(s) of accommodations.	
List type(s) of transportation. <i>Note:</i> All chartered/borrowed vehicles require a Certificate of Insurance. Check the approved vendor list before submitting a request form .	
List all activities to be conducted. Any contracts or liability waivers/awareness of risk forms are to be emailed to customercare@gscoc.org for the Council's Volunteer Support team to review. Review and follow Safety Activity Checkpoints for each activity.	
If swimming, explain where (e.g., in a backyard pool, hotel/cruise ship pool, open water). Requires a lifeguard to be on duty.	
If boating, list craft type (e.g., raft, canoe, kayak, etc.) and water type (e.g., flatwater, moving water, ocean/bay, etc.). Requires a certified guide or instructor.	

Certified/qualified adults who will be supervising the activities stated above.

Activity	Certified/Qualified Adult Name	Type of Certification	Expiration Date

☐ Check here if any activities will be conducted through contracting an individual or company providing equipment, instructors, supervision or program (e.g., guides, outfitters, touring company, livery, rental agency, etc.). A Certificate of Insurance is to be obtained for each company as soon as possible, but no later than at least two weeks prior to trip.

Specify activities and name of contracted individual/company:

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BUDGET

Income		Expense	
Troop Treasury	\$	Transportation	\$
Fall Product Program	\$	Girl/Adult Insurance	\$
Cookie Program	\$	Accommodations	\$
From Caregivers	\$	Entertainment (tickets, etc.)	\$
Money Earning Activity #1	\$	Food/Meals	\$
Money Earning Activity #2	\$	Emergency Money	\$
Other*	\$	Spending Money	\$
Total Income	\$	Other*	\$
		Total Expense	\$
Total Cost per Girl	\$	Cost per Girl that Family Pays	\$
Total Cost per Adult	\$	Cost per Adult that Adult Pays	\$

*Describe "other" expenses and income.	
How are you ensuring this trip is affordable to all girls in the troop/group?	
Are 75% of girl troop members attending? ☐ Yes ☐ No	If no, has a comparable trip been planned for those unable to attend? ☐ Yes ☐ No
Describe your comparable trip plan.	

Checklist for Trip Approval

- ☐ Participant list- names of all girls and adults attending (submit along with this form).
- ☐ Detailed trip itinerary- list all locations and activities (submit along with this form).
- ☐ [Insurance Order form](#) and payment (submit along with trip approval confirmation at least two weeks prior to trip). If not submitted before deadline, the order may not be processed, which will delay trip approval.
- ☐ Copy of rental agreement or vehicle rental receipt for hired vehicles and other contracts/agreements (if applies to your trip).
- ☐ Check [approved vendor list](#) or submit a [Certificate of Insurance Request form](#) if certificate of insurance is required for your trip/activities.

Agreement

I am aware of applicable Girl Scouts of the Colonial Coast and GSUSA policies, standards and procedures found in current versions of [Safety Activity Checkpoints](#), [Volunteer Essentials](#) and [National/International Trip Guide](#), and agree to follow them.

COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. As with any social activity, participation in Girl Scouts could present the risk of contracting COVID-19. While Girl Scouts of the Colonial Coast takes every safety and preventative precaution, Girl Scouts of the Colonial Coast can in no way warrant that COVID-19 infection will not occur through participation in Girl Scouts of the Colonial Coast programs.

Printed Name of Troop/Trip Leader _____ Signature _____ Date _____

Trip Endorsement and Approval

Service Unit Program Consultant – provides initial endorsement of trips.

☐ Endorsed ☐ Not Endorsed

Comments:

Date emailed to the Council at customercare@gscoc.org for final approval. _____

Printed Name of SU Program Consultant _____ Signature _____ Date _____

Council Use Only – provides final approval for trips.

☐ Approved ☐ Not Approved

Comments:

Date emailed approval status to troop/trip leader and service unit program consultant. _____

Date recorded in National/International Trip spreadsheet. _____

Printed Name of Council Staff _____ Signature _____ Date _____