

Parent Permission Form

www.girlscoutsLA.org This form is REQUIRED for every Extended-Day/Overnight/High-Risk activity or trip

EMERGENCY: (877) 423-4752

TOP portion is for parent information to keep. BOTTOM portion to be returned signed to Leader.

Check all that apply			
☐ When Annual Permission form	use is not given by par	ent/caregiver	
☐ Extended-Day Trips – (8+ hours) SUM or designee app	proval required prior to se	ending to parents
☐ Short Overnight Trips – (1-2 nig			
		• • • • • • • • • • • • • • • • • • • •	Tier 2 high-risk activities, list on page 2
☐ Extended/International Travel (
https://www.gsglavolunteerapps.			quired) i iii out cioiiii
inteps.//www.goglavoranteerapps.		y Information	
Date: Time:			n, etc.)
Destination Address:	Wiode of trains	City:	State: 7in:
Drop Off Location:	Time:	Pick up Location:	State: Zip: Time:
Troop/Group Pays: Fan	nily Pays: F	Purpose of Fee:	
Please Bring:			
	Troop Info	rmation Required	
Troop/Group #: Level	(s):	C S A Service Unit	:
Name of London and Adulting the con-		Di	T I A days
Name of Leader or Adult in charge		Phone	E-mail Address
Name of second Adult in charge		Phone	E-mail Address
Emergency Contact Person for this ac	tivity (Adult who is not a	ttending event/activity)	Emergency Contact Phone
5 ,	, (0 , ,,	<i>5</i> ,
Name of Certified First Aid/CPR/AED	rained Adult (attending)		Certification Expiration Dat
Check ONLY requirements n	eeded for this activit	ty: GS training (Please	indicate date training was taken)
☐ Indoor Overnight: Name of Tr			
			Date:
			Date:
☐ International Troop Travel: Name			
			Certificate Exp:
			Certificate Exp:
Specialty:			ith CCCIA Valuntary Franchina
	edures for this activity	y and agree to comply w	ith GSGLA Volunteer Essentials and
Safety Activity Checkpoints	gnature of Leader or Adu	Ilt in charge during Activity	Date
Si	gnature of Leader of Add	iit iii charge during Activity	Date
Signature of SUM or Designee			Date Approved/Reviewed
	× × × ×	: × × × ×	< × × × × × × ·
Parent/Caregiver, p	lease complete, sign	and return this botto	m portion only to Leader
A ativita a de accidente de la			
Activity description:			
•	has	s my permission to participa	ate with this Troop/Group in the above
activity on this date and time.			
			te Phone:
☐ I have discussed appropriate behave	ior with my daughter. Al	lso, I will make sure she doe	s not participate if not feeling well.
Signature of Parent/Caregiver			 Date

3/2019

List of Tier 1 High-Risk Activities that can be approved by Service Unit Manager (SUM) or Designee

Tier 1

Archery & 3-D Archery	Air & BB Guns	Cross Country Skiing	Horseback Riding
Hayrides	Indoor Skydiving	Segway	
Backpacking, unless involves challenging terrain, extended travel and/or other high risk activities	Off shore water passenger vehicle, such as whale watching, Catalina Express	Tethered Hot Air Balloon	Downhill Skiing/Snowboarding

List of Tier 2 High-Risk Activities that are approved by Service Unit Manager (SUM) AND Council by use of Extended Travel/High-Risk Application

Tier 2

Challenge Courses	Climbing & Rappelling	Recreational Tree Climbing	Zip Lining
Sailing	Scuba Diving	Tubing	Surfing
All Paddle Sports: Canoeing, Corcl Boats, Kayaking, Row Boating, Standup Paddle Boarding, Whitewater rafting	Backpacking, IF involves challenging terrain, extended travel and/or other high risk activities	Spelunking/Caving	Waterskiing and Wakeboarding
	Snorkeling	Target Sports: Knife Throwing, Muzzle loading, Pistol, Rifle, Shotgun – Trap/Skeet Shooting, Target Paintball, Tomahawk/Hatchet Throwing	Windsurfing/Sail Boarding

For the complete Safety Activity Checkpoints document - https://www.girlscoutsla.org/content/dam/girlscouts-girlscoutsla/documents/membership/All Safety Activity Checkpoints.pdf

3/2019