

ATTENTION:

Brownie & Junior



*******Troops and Individual Scouts WELCOME!*******

What: Earn a Brownie or Junior First Aid Badge

Where: Camp Winona 6875 Winona Place, Hughesville, MD 20637

When: Saturday March 8, 2014

Why: To learn valuable, potentially life-saving information & help ambassador Troop 1870 fundraise for their final trip to Adventures on the Gorge in West Virginia

Brownies: 9am – 12pm. Sign in at 8:45am, program begins promptly at 9am!

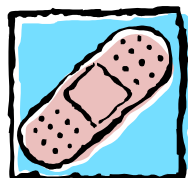
Juniors: 1pm – 4pm. Sign in at 12:45pm, program begins promptly at 1pm!

Cost: \$10 per scout

Register by February 26th, 2014 to receive badge on March 8

Includes: Brownie or Junior First Aid Badge, water and a snack

Contact: SU 12-3 T1870 leaders Susan Richman srichman4@verizon.net 301-843-7170 or Laura Schierlmann lschierlmann@yahoo.com 301-744-8439 for more information



FIRST AID BADGE 03/08/14 REGISTRATION FORM

Form MUST BE filled out in its entirety and payment received to be considered a COMPLETE registration.

Girl's Name _____ Age _____ Birth date ____/____/____

Address _____ Phone _____

Mother/Guardian _____ Day phone _____

Cell _____ Email _____

Father/Guardian _____ Day phone _____

Cell _____ Email _____

Is your daughter currently registered in Girl Scouts?

☐ Yes ☐ No If yes, Troop # _____

The registrant's racial background is: (please check as many as apply)

☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ White ☐ Other

☐ Hawaiian or Pacific Islander (please check one) ☐ Hispanic or Latina ☐ Not Hispanic or Latina

Attending with a friend?

☐ No ☐ Yes, Friend's Name _____

Is your daughter interested in joining a troop?

☐ Yes ☐ No

Is your daughter interested in future events?

☐ Yes ☐ No

HEALTH HISTORY

To be completed for ALL participants. Please use additional sheet to describe symptoms of allergies and details of illnesses or health restrictions.

Allergies: Insect Bites/Stings Hay Fever Poison Ivy/Oak Other

Please specify any accommodations that are needed:

Health Concerns: Ear Infections Asthma Diabetes Convulsions Skin Conditions Other

Please specify any accommodations needed:

Disabilities: ADD/ADHD Emotional Disability Learning Disability Physical Disability Visual Disability Deaf/Hard of Hearing

Behavioral Problems Other

Please specify any accommodations needed:

Operations or serious injuries:

Immunization History: Are all immunizations up-to-date?

Yes

No

Dates:

DTP or DT (Tetanus)

Date:

If immunizations are not up to date, including the DTP, please submit a state certificate from physician or parent stating medical or religious reason.

Medication Information: If your child requires medication at event (prescription, over-the-counter medication, Epi-Pen or inhaler) please complete the Medication Permission Form located on our website. http://www.gscnc.org/daycamp_medication.html

Note: Medication CANNOT be administered at event without the submission of this form or an appropriate substitute.

General Information – Please fill out all information

Family Physician:

Phone:

Health Insurance Company:

Policy #:

Address:

City:

State:

Zip:

Parent Permission Statement

•**EMERGENCY AUTHORIZATION:** In the event I cannot be reached in an emergency, I hereby grant permission to the program director to secure proper treatment for my child.

•The Girl Scouts may use any photo in which my child appears to promote Girl Scouting.

•I understand my daughter will become a registered member of the Girl Scouts of the USA through participation in this program.

Parent/Guardian Signature required: Please specify Parent or Guardian.

Parent/Guardian _____

Date _____

Phone # During Event _____

AGENDA FOR THE DAY:

8:45am – Brownie scouts arrive and check in

12:15pm – Brownie families depart

4pm – Junior program ends

9am – Brownie First Aid badge begins

12:45pm – Junior scouts arrive and check in

4:15pm – Junior families depart

12pm – Brownie program ends

1pm – Junior program begins

For Questions please contact: Susan Richman at 301-843-7170 srichman4@verizon.net or Laura Schierlmann at 301-744-8439 lschierlmann@yahoo.com