



Plan 3PI

Enrollment Form for Girl Scout Councils

Council # 688



1. Complete all sections of this form. **Please submit this form 6 weeks prior to the planned event(s).** There is a minimum premium of \$5.00. Several events may be submitted in one request to satisfy the minimum.
2. Submit this form electronically to Travel@girlscoutsww.org or by mail to Girl Scouts Western Washington, Attn: Travel Program Manager, 5601 Sixth Ave S, Suite 150, Seattle, WA 98108.
3. **Do not submit payment with the application.** After the application has been approved, it will be submitted to the finance department for processing; you will receive an electronic invoice from Wufoo Paypal to submit payment.

Service Unit # and Troop #/ Group Name: _____

Name of Person Submitting Form: _____

Email Address: _____

Phone Number: _____

Signature of Person Submitting Form: _____

Visit our [website](#) for safety and insurance-related resources.

By submitting this form, I/ we request that Mutual of Omaha provide Accident Insurance to cover all enrolled participants in the following approved, supervised Girl Scout activities (except statutory employees covered under workers' compensation).

Schedule of Trip

(1) (2) (3) (4) (5)

Name and Location of Trip	Beginning Date	Ending Date	Number Participants	Number of Days	Number Participant Days (1 x 2)	Premium Each Day	Total (3 x 4)
SAMPLE: Troop ##### Trip to England	02/05/XX	02/09/XX	25	5	125	\$1.17	\$146.25
						\$1.17	
Total	N/A	N/A				\$1.17	

Trip Roster

*Include youth & adults. If more space is needed, please continue on an additional page. (*age at time of trip)*

Trip Country	Name	Age*	Trip Country	Name	Age*

Council Use Only

Payment Method: _____

Payment Date: _____

Signature of Approval

Staff Title

Date