

Complete, **review and submit** this application packet based on the type of travel listed below. Submit it to Customer Care within the designated timeframe at: customercare@citrus-gs.org with "Troop Travel Application" in the subject line.

| Approved: Yes No | | |
|---------------------------------|---|--|
| Date: | | |
| Signature: | _ | |
| This box is for staff use only. | | |

Only complete this packet for the following Troop Travel Experiences:

- All Domestic Troop Travel and/or Camping trips that are 3 nights or longer
- ➤ All Cruises no matter the length or destination
- All International Travel no matter the length or destination

Reminder: To avoid any delays in your applications, please be sure all the information is correct, and copies of current certifications are provided. Packets need to be submitted on the following timeframe with the required supporting documents:

- ➤ All Domestic Troop Travel and/or Camping 60 days before the trip
- > All Cruises no matter the length or destination 60 days before the trip
- All International Travel no matter the length or destination- 9 months before the trip
 - ✓ Application, forms, and preliminary rosters are due by the timeline above.
 - ✓ Final rosters, certifications, travel arrangements, agendas, etc. are due 30 days prior to the trip.

Once the preliminary information is received you will be notified within **10 business days** of the status of your request and if there are any concerns.

General Information

| Troop # | _Service Commun | ity | | Troop Level | |
|--|-----------------|-----|-------------|--------------|--|
| Troop Contact Nam | ne: | | _Contact Ph | one: | |
| Email: | | | | | |
| Travel Destination: | | | | | |
| | | | | ting From: | |
| Return Date: | Time: | | Arrivin | ıg To : | |
| lumber of Girl Scouts traveling by level: | | | | | |
| DY:BR: | _JR:CD: | SR: | AB: | Total Girls: | |
| lumber of Adults (Must follow Ratio): Female: Male: Total: | | | | | |

All adults attending must:

- ➤ Have a current GSUSA membership with a favorable background check, which does not expire before the end of the trip.
- Complete the annual required GSUSA Girl Scouts Child Abuse and Neglect Prevention Course found in gsLearn.



<u>All Required Certifications</u> – Must be current throughout the trip, listed on roster and copies must be submitted with paperwork i.e. Troop Camper, FA/CPR, Water Safety, etc.

| Name | Type of Certification | Expiration Date | | | |
|--|---------------------------------|--------------------------|--|--|--|
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| Select the Type of Trip: | | | | | |
| Domestic Troop Travel and | d/or Camping trips that are 3 n | nights or longer | | | |
| Cruises no matter the length or destination | | | | | |
| ➤ International Travel no matter the length or destination | | | | | |
| Has your troop/group participated in If yes, where have they traveled t | | □ No □ | | | |
| | | | | | |
| | | | | | |
| If applicable, has your troop/group and prepare for the type of trip the If yes, please explain: | <u> </u> | o to discuss how to plan | | | |
| | | | | | |
| | | | | | |



Girl Scout Leadership Experience

| What is the purpose of this trip? |
|--|
| How are you ensuring it is a girl-led trip? |
| Is your troop incorporating a badge, Journey, or Girl Scout activity? Yes No |
| If yes, which ones? |
| Which one of the National Pillars best match the activities on your trip (Choose all that apply) |
| Outdoor STEM Life Skills Entrepreneurship |
| Money Earning |
| Estimated cost per girl: \$Estimated cost per adult: \$ |
| Total Budget: \$ |
| Does your group plan to participate in council-sponsored product sales? Yes No |
| Does your group plan to conduct any money-earning activities? Yes No |
| Please describe if applicable: |
| |
| <u>Transportation</u> (Review Safety Activity Checkpoints for Drivers) |
| Type of Transportation: Personal Rental Chartered Commercial |
| Make/Model of vehicle(s): |
| Number of passengers each vehicle holds: |
| *Reminder that 15 passenger vans are not permitted – private or commercial (refer to Safety Activity Checkpoint for details) |
| If applicable, list the name of the transportation or rental company and contact information and include contract: |
| If using a tour company list name and attach their itinerary: |



Other Transportation

| Airline/Boat Name: | | Flight/ Trip # | |
|----------------------------|-------------------|-------------------|---|
| Departure Date: | Time: | Location: | _ |
| Return Date: | Time: | Location: | |
| Hotel/Site Information | | | |
| 1. Name | A | ddress: | |
| Dates on location: _ | | | |
| 2. Name | A | ddress: | |
| Dates on location: _ | | | |
| Activities and or Excu | <u>rsions</u> | | |
| Are there any high-risk | activities on thi | s trip? Yes No No | |
| Type of activities | : | | |
| Are they on the GSC ap | proved vendor | list? Yes No | |
| lf not, please list: Vendo | r: | Phone: | |
| Contact Name: | We | ebsite: | _ |

Reminders for travel:

- ➤ All adults that are driving either personal or rental vehicles for the trip, must be 25 years old and complete the attached "Volunteer Add Driver Form" and submit with this packet.
- Someone that is currently certified in the appropriate level of CPR/FA must attend the trip, in addition to other training courses as required. Be sure to complete the information below and submit the certifications with this packet.
- ➤ Be sure to review Safety Activity Checkpoints (SAC) for all activities your troop/group is participating in and verify grade level, safety equipment, guidelines, etc.
- Cruise Ships:
 - Vetted cruise lines have been approved based on the information that was provided at the time of the approval. It is still the responsibility of the Troop Co-Leader/Parent/Guardian to make sure the guidelines are still in place to participate by referring to the SAC. An example would be: do not swim in a pool, where there is not a lifeguard present, etc.
 - Only use excursion vendors that can be booked and that are vetted through the Cruise Ship; never use vendors that are outside of the designated area.



Training Certifications the adults attending the trip have. Be sure to submit copies.

| Name of Certification | Date Expires | Additional Info if Applicable |
|--|--------------|----------------------------------|
| First Aid/CPR | | |
| Advanced First Aider | | |
| Wilderness First Aid | | |
| Troop Camper Level 1 | | |
| Troop Camper Level 2 | | |
| Troop Camper Level 3 | | |
| Small Craft | | |
| Lifeguard | | |
| Red Cross Water Safety Parents Guardians | | |
| Other | | |

Emergency Contact

List the name of one or two adults that are a minimum of 21 years old and is not going on the trip, who will be the designated contact person for parents/guardians in case of any emergency/incident or change in itinerary. This person has a current GSUSA membership and favorable CBC. They have a copy of the roster, itinerary and all other information for the trip.

| 1. | Name: | Phone: |
|----|-----------------|--------|
| | Email : | |
| | Troop Position: | |
| 2. | Name: | Phone: |
| | Email : | |
| | Troop Position: | |

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Statement of Compliance for all Travel Opportunities:

As the designated leader/responsible adult for this trip, I have reviewed, understand, agree, and will comply with the following guidelines:

- 1. Adhere to all guidelines in: Safety Activity Checkpoints, Volunteer Essentials GSUSA and Girl Scouts of Citrus Council health, safety, and emergency procedures.
- 2. Monitor the current travel status for the location we are traveling to (if outside the United States) on the Department of the State website, Travel.State.Gov_https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html/ and understand that Girl Scouts should reconsider travel if the location is currently at a Level 3, and never travel to a location that is currently at a Level 4.
- 3. Complete and review all the travel documents and current guidelines that will be required for the trip, from the government, location, GSC or GSUSA.
- 4. Review the current communicable disease information found on both the GSC and CDC websites and understand that it is my responsibility to make sure all guidelines are followed at all locations, activities, and stops. This includes checking all travel restrictions and advisories.
- 5. I understand that certain communicable diseases can be extremely contagious that spread easily when traveling and/or in large groups of people. I have discussed with each troop/family that they should weigh their participation based on their own, as well as their family members' health concerns.
- 6. As with any social activity, participation in Girl Scouts could present the risk of contracting a communicable disease or sickness. While Girl Scouts of Citrus takes every safety and preventative precaution, I understand that Girl Scouts of Citrus can in no way warrant or be held responsible that any sickness or infection will not occur through participation in Girl Scout activities.
- 7. For all high-risk activities that take place outside of the state of Florida, I have verified that the vendor carries a 1-million-dollar liability policy, and that I have followed all guidelines in Safety Activity Checkpoints, including to verify that it is an approved activity, appropriate for the grade level of my troop/group and that the appropriate trained staff are provided.
- 8. Every driver must be at least 25 years of age, have a current GSUSA membership, a favorable background check, complete annual Child Abuse and Neglect Training, a valid driver's license with a safe driving record, (more specific, without any driving restrictions) with two or more years of driving experience, and a registered/insured vehicle.
- 9. When driving as a group, if there is only one vehicle, there must be at least two unrelated, registered background checked members (approved adult volunteers) in the vehicle, at all times one of whom is female.
- 10. If there is more than one vehicle, the entire group must consist of at least two unrelated, registered background checked members (approved adult volunteers), if a male volunteer is driving, there must also be another unrelated female adult in the vehicle.

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- 11. When driving, I will ensure there are breaks built into the schedule, to allow time for drivers to rest. If a trip is longer than 6 hours, have relief drivers for each vehicle.
- 12. All vehicles are currently registered, insured, have had a maintenance inspection within 60 days of the trip and have a seat and seatbelt for every passenger.
- 13. Vehicle checklists are to be completed on the 1st and last day of the trip, and at the beginning of each day of travel that will be for longer than 60 miles .
- 14. Verify current certified lifeguards are present for all swimming activities and are trained for that specific category of swimming.
- 15. Verify current certified instructors/facilitators are present for all high adventure or aquatic activities.
- 16. I also understand that by providing incorrect information or participating in an activity that is not approved, could result in the trip not being covered by Girl Scout Activity Insurance and could increase my own personal liability.
- 17. Parents/guardians will be informed and receive a copy of the trip itinerary, travel plans, safety procedures, and contact information.
- 18. Appropriate permissions have been obtained for each girl/adult including Health History/Health Exam, waivers, intent to travel, permission forms, etc.
- 19. All members of our group/troop will always behave in a positive manner while representing Girl Scouts and follow all guidelines.
- 20. All adults and girls have completed and submitted behavioral/photo agreements.
- 21. Each vehicle will have trip binders (that will contain all pertinent information for everyone) and a first aid/emergency kit.

22. I will personally review all the guidelines with all adults/parents that are attending the trip or staying home, and the Girl Scouts that are attending to ensure that everyone has a clear understanding of what to expect on this trip.

| First Designated Co-Leader/Registered Adult A | attending the Trip: |
|---|-------------------------|
| Print Name: | |
| Signature: | _Date: |
| Second Designated Co-Leader/Registered Adu | ılt Attending the Trip: |
| Print Name: | |
| Signature: | _Date: |
| Designated Troop First Aider Attending the Trip |): |
| Name: | |
| Type of Certification: | Expiration Date: |

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Checklist for all Travel - No matter the length of time

Be sure to review all the required paperwork and the specific forms that are required for your type of trip. Have all the approved and required paperwork, and all forms on hand for the trip in two binders, one for each responsible adult. If there are more than two vehicles have a binder for each vehicle.

All Forms and Resources can be found on the website: Forms and Documents

Paperwork to Submit to Council:

- Completed Troop Travel Application submit according to the timeframe
- Volunteer Add Driver Form for all drivers
- Travel Roster
- Copy of First Aid/CPR Certification(s)
- ➤ Copy of Training certifications if applicable
- Copy of all Driver's Licenses
- Itinerary with all activities and accommodations
- Statement of Compliance included in packet
- Travel contracts/arrangements

Review: GSUSA guidelines for the type of travel you will be participating in when you begin planning your trip:

- ✓ Girl Scout Travel Progression Chart
- ✓ Safety Activity Checkpoints
- √ Volunteer Essentials
- ✓ Girl Scout Guide to U.S. Travel (Domestic)
- ✓ The Girl Scout Guide to International Travel

Additional information:

When going on any Cruise:

- Be sure to review the approved vendor list for approved cruise lines.
- Be sure that cruise ships have lifeguards at the pool.
- If lifeguards are not provided, you must bring a certified pool lifeguard with you.
- For all excursions, they must be an approved activity and have the required certified staff available, based on Safety Activity Checkpoints.

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Forms

The designated leader /responsible adult for this trip should ensure that all the following forms are completed when applicable and always with them. These do not have to be submitted into the council, unless specified.

| | Domestic Troop Travel | Cruises no matter the | International Travel no | Only turn these forms in |
|--|-----------------------------|-----------------------|----------------------------|----------------------------------|
| | and/or | length or | matter the | to the Council |
| | Camping trips that are 3 | destination | length or destination | for approval, all other forms |
| | nights or longer | | destination | are to be kept |
| | Ingilio or longor | | | in the binders |
| Approved Travel Application | Х | Х | Х | X |
| Travel Roster | Х | Х | X | Х |
| Parent Permission for Activity | X | Х | X | |
| Trip/Travel Behavioral/Media Release | X | Х | X | |
| Needs Assessment | X | Х | X | |
| Swimming Test (if applicable) | X | Х | X | |
| Girl Health Exam | X | X | X | |
| Adult Health Exam | X | Х | X | |
| | Х | X | Х | |
| Insurance Claim Forms | X | X | X | |
| Copies of Certifications (FA, | X | X | X | Х |
| Troop Camper, Lifeguard, etc.) | | | | |
| First Aid Treatment Log (First Aider) | X | X | X | |
| Accident/Incident Forms | X | X | X | |
| Authorization to Treat – per Minor | X | X | X | |
| Authorization to Treat – per Adult | X | Х | X | |
| Permission to Self-Administer | If applicable | If applicable | If applicable | |
| Auto Injectors/Inhalers - Minors | | | | |
| Permission to Travel for Minors- must | If applicable | If applicable | If applicable | |
| be completed if traveling outside the | | | | |
| state of Florida without a | | | | |
| parent/guardian | | | | |
| Safe Driver Pledge – when | If applicable | If applicable | If applicable | |
| transporting for a Girl Scout Activity | | | | |
| Volunteer - Add Driver Form for all | If applicable | If applicable | If applicable | X |
| drivers that will be driving at any time | | | | |
| on the trip – must be submitted with | | | | |
| the packet | | | | |
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