



Troop Activity Request - TAR

This Troop Activity Request Form is required to be completed for the following:

- Annually for troop meetings (Complete residential form if meeting at a home). Requests will only need to be submitted once per membership year unless there is a location change.

When troops want to participate in any activity outside of their regular meeting place, such as:

- Any High Adventure Activities (Vendors must be on the approved vendor list).
- Day/Overnight trips that take place at any location, including GSC properties.
- Overnight lock-ins/sleepovers at an approved community partner/vendor site.
- Backyard Campouts (Must have a current Troop Camper and complete residential form).
- To attend/participate in an approved Camporee.
- To attend any overnight or camping trip that is 2 nights or less, with an approved location in the state of Florida (must have a current Troop Camper if camping)

Reminders:

- Submit this TAR to your Community Safety Coordinator (CSC) for approval a minimum of **two weeks** prior to the date. Keep a copy of all your paperwork. Once the CSC approves the troop meeting/activity, they will send the approval email to the person that submitted it, copying their Operations Lead.
- This form is **NOT** for Troop camping/travel that is more than 2 nights, and/or outside of the state of Florida – For these trips be sure to complete the Travel Packet and submit to Customer Care.
- All troops must always have their own Troop First Aider with them and present at all activities.

Troop Contact Name: _____ Troop #: _____ Community: _____

Contact # _____ Email: _____

Number of Participants: DY ___ BR ___ JR ___ CD ___ SR ___ AMB ___ Female Adults ___ Male Adults ___

Troop First Aider Name: _____ Certification Expiration: _____

Location Name: _____ Location Address: _____

Point of Contact: _____ Contact # _____

Select the following from the drop down:

Please describe what activities you will be participating in: Ropes Course, Campfire, Swimming, et

Always have the following items with you:

- | | |
|-------------------------------------------------------------------------------------|---------------------------------|
| ✓ GSC Emergency Procedures | ✓ General First Aid Kit and Log |
| ✓ Completed Rosters/Permission Forms | ✓ Waivers if Applicable |
| ✓ Annual Health History forms for all adults and youth with all current medications | ✓ Insurance Claim Forms |
| | ✓ Accident/Incident Forms |

As the responsible adult for this troop, I have checked all applicable guidelines according to the Safety Activity Checkpoints, Volunteer Essentials, and any other specific guidelines. I have verified that all adults/ girls are aware of the protocols and all girl/adult ratios have been met:

Volunteer Name: _____ Volunteer Signature: _____ Date: _____

CSC Name: _____ CSC Signature: _____ Approval Date: _____



Member Roster for All Activities

Roster must be submitted with all TARs

Troop # _____ Troop Meeting: ____ Event/Activity ____ Name of Event/Activity: _____ Date of Activity: _____

Please Note: All Adult Participants must be registered members and approved volunteers. List all girls and adults below, be sure to complete all the information including: First Aider, Troop Camper, Water Safety, and/or any other trained volunteers that are attending. (Be sure to include their certifications when you submit this paperwork) Review Safety Activity Checkpoints for all guidelines

Participant's Name	Adult or Girl	Grade	Attending Event	Emergency Contact	Emergency Phone #	Relationship	Certifications FA, TC, WS, etc.	Expiration Date	CBC Exp. Date	SAM Training Date
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										