

## **Troop Meeting/Activity Request Form - TAR**

Approved	
Date	

Effective 2/1/2021 Girl Scouts of Citrus Council has approved a limited amount of outdoor only activities for girls to participate in, specifically: Ceremonies, Highest Award projects, Community Service Projects, Day Trips to Local and State Parks, Nature Centers, Tabling Events, Badge/Journey Programs and any other approved vendors on our approved vendor list found at <a href="https://www.citrus-gs.org">www.citrus-gs.org</a>.

**Please Note:** Camping, Sleepovers, Camporees and select High/Risk Adventure activities are not permitted at this time. When these activities begin, these approvals will get approved through Council.

Effective 2/1/21 all meeting/activity requests are to be submitted to your Community Safety Coordinator (CSC) for approval, a minimum of two weeks prior to the date. If your troop is currently meeting and was approved through Council, you still need to submit the new paperwork to your CSC for tracking. Please be sure to keep a copy of all your paperwork. Once the troop meeting/activity is approved, the person that submitted the request along with their Community Engagement Manager will receive the approval email. Troop meeting requests will only need to be submitted once per membership year unless there is a location change.

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Please select the location of the activity:	Outdoor Resid	dence _	Ind	oor Public	Outdoor Public	
Troop#: Community Name:						
Troop Meeting – Dates:		· · · · · · · · · · · · · · · · · · ·		Time: From _	to	
Activity – Date: Ti	me: From	to				
Location Information: Facility/Owner's Name	:	· · · · · · · · · · · · · · · · · · ·				
Facility Address:						
Number of Participants: DY BR	JR CD	_SR	AMB _	Female Adı	ults Male Adults	
Always be sure to have the following paperw  Pre – Screening Forms Completed Rosters Parent Permission Forms GSC Covid Guidelines Accident Reports Insurance Claim Forms GSC Emergency Procedures Annual Health History for All Adult with all Medications  As the responsible adult for this troop, I have	ork, forms and	I supplies	Hand Dispo Disin Disin Tissu Cont	u at all times : I Sanitizer – at osable Face Ma fecting/Sanitiz fectant Cleane fectant Spray es, Gloves and actless Thermo	least 60% alcohol asks zing Wipes or er with Paper Towels (Lysol) d Garbage Bags ometers it and Log	
CDC and Girl Scouts of Citrus Covid 19 Specessentials. I have verified that all adults/ girls	cific Guidelines	s, Safety	Activity	Checkpoints a	ind Volunteer	
Volunteer Name Typed :			_ Contact Email:			
Volunteer Signature:				Date:		
CSC Name:	CSC	Signatur	e:			