

# 2020

## COOKIE PROGRAM Parent/Guardian Permission



### PARENT/GUARDIAN PERMISSION & STATEMENT OF RESPONSIBILITY AGREEMENT

My Girl Scout is a member of Troop # \_\_\_\_\_ and has my permission to participate in the 2020 Cookie Program and to allow any photographs taken or videotapes recorded during this activity to be used to promote Girl Scouting in Citrus Council. I will see that she honors any and all rules and procedures as set by the Girl Scouts of Citrus Council, Inc. (GSC) and that she has adult supervision and guidance. My signature below indicates agreement with all 8 items listed below:

1. My Girl Scout must be officially registered with Girl Scouts of the USA in order to participate.
2. I accept personal financial responsibility for all products received and monies collected as payment from customers.
3. I understand that the 2020 Cookie Program proceeds are Troop & Council property and “the funds are for Girl Scout activities and are not to be retained by individuals as their property.” (Volunteer Essentials Money Earning Basics)
4. I agree that all money collected must be given to my Girl Scout’s Troop by the Council-set deadlines.
5. GSC reserves the right to seek the services of a collection agency and/or pursue legal action for delinquent accounts.
6. GSC reserves the right to substitute recognition items of equal or greater value with or without notice and that recognition items in the form of tickets are valid only on the date printed on the tickets. The recognition items are non-transferable and not redeemable for cash; GSC will not be responsible for lost, stolen or damaged tickets or cards.
7. Adults serve in a supporting role for girls and should not assume sole responsibility for sales.
8. Unsold product cannot be returned to, or exchanged at, Council offices or any Council Cupboard.

**TROOP COOKIE CHAIR, PLEASE HAVE PARENTS SIGN THIS FORM AT YOUR PARENT MEETING AND TURN INTO YOUR COMMUNITY COOKIE CHAIR UPON COMPLETION**

Troops/girls who begin participating after Initial Order should turn in Permission Forms to Community Cookie Chair as soon as possible.

### Parent/ Guardian Information

\_\_\_\_\_  
Parent/Guardian Name (Print Please)

\_\_\_\_\_  
Email Address (Print Please)

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City/Zip

\_\_\_\_\_  
Home Phone/Alternate Phone

\_\_\_\_\_  
Girl Name (Print Please)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Girl Signature

PLEASE USE BOTH SIDES OF FORM

**MUST BE SIGNED AND TURNED INTO COMMUNITY COOKIE CHAIR**

## Parent/ Guardian Information (CONT'D)

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Parent/Guardian Name (Print Please)

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Email Address (Print Please)

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Home Address

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City/Zip

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Home Phone/Alternate Phone

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Girl Name (Print Please)

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Parent/Guardian Signature

---

Girl Signature

---

---

Parent/Guardian Name (Print Please)

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Email Address (Print Please)

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Home Address

---

City/Zip

---

Home Phone/Alternate Phone

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Girl Name (Print Please)

---

Parent/Guardian Signature

---

Girl Signature

---

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Parent/Guardian Name (Print Please)

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Email Address (Print Please)

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Home Address

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City/Zip

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Home Phone/Alternate Phone

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Girl Name (Print Please)

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Parent/Guardian Signature

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Girl Signature