



MINI BOW 2020



Registration Form

Fee \$75.00 (Non-Refundable, Non-Transferable)

Complete and return to the Council office with full payment by Friday, May 1st

GENERAL INFORMATION

Girl Name (Last, First, MI):

Mailing Address:

Street _____ City _____ Zip _____

Birth Date: _____ **Age:** _____ **Grade:** _____

Troop: _____ **CURRENT Grade Level:** Junior Cadette Senior Ambassador

Camping Experience:

HEALTH INFORMATION

Allergies (please list all):

Please note: Food restrictions cannot be accommodated; campers will be responsible for bringing their own food

Any other health conditions:

Things your camper may need help with:

Behavioral Problems Chronic/Recurring Illness Menstruation

Other: _____

Medications (please list and explain):

Please note: Mini BOW staff & volunteers may not be able to accommodate all special needs

CUSTODIAL PARENT/GUARDIAN INFORMATION

Camper is in the custody of:

Both Parents Mother Only Father Only Other: _____

Parent/Guardian Name: _____ Phone: _____

Work Phone: _____ Email: _____

Parent/Guardian Name: _____ Phone: _____

Work Phone: _____ Email: _____

Local Emergency Contact (other than Parent/Guardian):

Name: _____ Relationship: _____

Daytime Phone: _____ Work/Cell Phone: _____

Email: _____

PARENT/GUARDIAN PERMISSION

My daughter, _____, has permission to attend Mini-Bow for Girl Scouts Camp and to participate in all phases of the program. I understand she can attend only if free of any potential health problems that might restrict participation at the event and is free of any communicable diseases that might endanger other participants.

In the event that I cannot be reached in an emergency, I hereby give permission for emergency care to be given. This authorization applies whether the charges are covered by Girl Scout insurance or by me. I give this authorization with knowledge that Girl Scout health insurance is secondary and does not provide coverage for every incident.

For myself and my spouse (if any) and on behalf of my minor daughter, I release, discharge, defend and hold Farthest North Girl Scout Council and its officers, directors, employees and volunteers, harmless from and against any and all claims, expenses and any other liabilities related in any way to injuries or other losses sustained by my child as she attends, participates in and travels to and from the activities and facilities of this event.

I have read, understand and agree to the rules of Mini BOW as described in the Mini BOW 2020 Information Sheet. I will make sure my daughter has all necessary items as listed on the Mini BOW 2020 Packing List.

I give Farthest North Girl Scout Council permission to use any pictures of my daughter for publicity and promotion of Girl Scouting.

Signature of Parent/Guardian

Print Name

Date