

Please complete this form and attach the bank deposit slip and receipt for the total amount of dues and contributions for the attached girl and/or adult forms only. All forms (Girl/Adult Registration, Membership Dues Summary, and Troop Worksheet) must be given to your Service Unit Registrar.

**** If registering additions to the troop/group, please fill out Sections 1, 4, 7 & 8 only ****

PLEASE CHECK ONE: **SPRING REGISTRATION** **FALL REGISTRATION**

Council Code	Service Unit	Troop Number	Neighborhood No	CHECK ONE
636	_____	_____	_____	<input type="radio"/> New Troop <input type="radio"/> Re-registering Troop <input type="radio"/> Additions

1.	Leader Name: _____ Is this a change of Leaders? <input type="radio"/> Yes <input type="radio"/> No Is the leader a Lifetime member? <input type="radio"/> Yes <input type="radio"/> No	Position: (check one) <input type="radio"/> Volunteer <input type="radio"/> Council Staff Is this a Co-op Troop? <input type="radio"/> Yes <input type="radio"/> No Leader is already registered with troop #: _____
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2.	Check the one term that best describes the primary way in which these girls participate: <input type="radio"/> Troop <input type="radio"/> Interest Group <input type="radio"/> Program Center/Facility <input type="radio"/> Outreach Troop <input type="radio"/> Event <input type="radio"/> Camp <input type="radio"/> Individual <input type="radio"/> Other: _____
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3.	Meeting frequency: (check one) <input type="radio"/> Weekly <input type="radio"/> Every Other Week <input type="radio"/> Monthly <input type="radio"/> 1-3 Times Annually <input type="radio"/> Other: _____
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4.	Please check one grade level that represents the majority of the girls who are registering now: <input type="radio"/> Grades K-1 (Daisy) <input type="radio"/> Grades 4-5 (Junior) <input type="radio"/> Grades 9-10 (Senior) <input type="radio"/> Grades 2-3 (Brownie) <input type="radio"/> Grades 6-8 (Cadette) <input type="radio"/> Grades 11-12 (Ambassador)
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5.	Type of meeting place: (check one) <input type="radio"/> Public Facility <input type="radio"/> Home <input type="radio"/> School <input type="radio"/> Religious Building <input type="radio"/> Other Organization Facility <input type="radio"/> Council Facility <input type="radio"/> Other: _____
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6.	Meeting day and location: Location Name: _____ Day: _____ Time: _____ Address: _____ City/State/Zip: _____
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7. Number of Girl Registrations: _____ Number of Adult Registrations: _____ Number of New Lifetime Members: _____ Total Number of Registrations: _____	Dues (at \$12/member) \$ _____ Financial Aid \$ _____ Lifetime Dues \$ _____ Family Partnership \$ _____ Total \$ _____	Cash \$ _____ Check \$ _____ Credit Card \$ _____ Cookie Credit \$ _____
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8.	Racial and Ethnic Information (Please indicate numbers for each)	Service Unit Registrar Complete Box Below																																				
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="6">Racial Background</th> <th colspan="3">Ethnic Background</th> </tr> <tr> <th></th> <th>American Indian or Alaskan Native</th> <th>Asian</th> <th>Black or African American</th> <th>Hawaiian or Pacific Islander</th> <th>White</th> <th>Un-reported</th> <th>Not Hispanic</th> <th>Hispanic</th> </tr> </thead> <tbody> <tr> <td style="text-align:center;">Girls</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> </tr> <tr> <td style="text-align:center;">Adults</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> <td style="text-align:center;">_____</td> </tr> </tbody> </table>	Racial Background						Ethnic Background				American Indian or Alaskan Native	Asian	Black or African American	Hawaiian or Pacific Islander	White	Un-reported	Not Hispanic	Hispanic	Girls	_____	_____	_____	_____	_____	_____	_____	_____	Adults	_____	_____	_____	_____	_____	_____	_____	_____	Stamped Bank Deposits \$ _____ Credit Card Charges \$ _____ Cookie Credit \$ _____ TOTAL FROM TROOP \$ _____ Date Submitted to Council: _____ SU Registrar Initials: _____ CDD Initials: _____
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Adults	_____	_____	_____	_____	_____	_____	_____	_____																														
	Because people may fall into more than one category, your totals may be more than the number of girls and adults registering.																																					