

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  |
|--------------|--------------|--------------|-----------------|--|
| <b>636</b>   | _____        | _____        | _____           | <input type="radio"/> New Troop <input type="radio"/> Re-registering Troop <input type="radio"/> Additions |

|           |   |   |
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| <b>1.</b> | <b>Leader Name:</b> _____<br>Is this a change of Leaders? <input type="radio"/> Yes <input type="radio"/> No<br>Is the leader a Lifetime member? <input type="radio"/> Yes <input type="radio"/> No | <b>Position:</b> (check one) <input type="radio"/> <b>Volunteer</b> <input type="radio"/> <b>Council Staff</b><br>Is this a Co-op Troop? <input type="radio"/> Yes <input type="radio"/> No<br>Leader is already registered with troop #: _____ |
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| <b>2.</b> | <b>Check the one term that best describes the primary way in which these girls participate:</b><br><input type="radio"/> Troop <input type="radio"/> Interest Group <input type="radio"/> Program Center/Facility <input type="radio"/> Outreach Troop<br><input type="radio"/> Event <input type="radio"/> Camp <input type="radio"/> Individual <input type="radio"/> Other: _____ |
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| <b>3.</b> | <b>Meeting frequency:</b> (check one)<br><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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| <b>4.</b> | <b>Please check one grade level that represents the majority of the girls who are registering now:</b><br><input type="radio"/> Grades K-1 (Daisy) <input type="radio"/> Grades 4-5 (Junior) <input type="radio"/> Grades 9-10 (Senior)<br><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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| <b>5.</b> | <b>Type of meeting place:</b> (check one)<br><input type="radio"/> Public Facility <input type="radio"/> Home <input type="radio"/> School <input type="radio"/> Religious Building<br><input type="radio"/> Other Organization Facility <input type="radio"/> Council Facility <input type="radio"/> Other: _____ |
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| <b>6.</b> | <b>Meeting day and location:</b><br>Location Name: _____ Day: _____ Time: _____<br>Address: _____ City/State/Zip: _____ |
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| <b>7.</b><br>Number of Girl Registrations: _____<br>Number of Adult Registrations: _____<br>Number of New Lifetime Members: _____<br><br><b>Total Number of Registrations:</b> _____ | Dues (at \$12/member) \$ _____<br>Financial Aid \$ _____<br>Lifetime Dues \$ _____<br>Family Partnership \$ _____<br><br><b>Total \$</b> _____ | Cash \$ _____<br>Check \$ _____<br>Credit Card \$ _____<br>Cookie Credit \$ _____ |
|--|--|---|

| 8. <b>Racial and Ethnic Information</b> (Please indicate numbers for each)   | Service Unit Registrar Complete Box Below |       |                           |                              |       |             |                   |                   |  |  |                                   |       |                           |                              |       |             |              |          |       |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |   |
|--|---|-------|---------------------------|------------------------------|-------|-------------|-------------------|-------------------|--|--|-----------------------------------|-------|---------------------------|------------------------------|-------|-------------|--------------|----------|-------|--|--|--|--|--|--|--|--|--------|--|--|--|--|--|--|--|--|---|
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7">Racial Background</th> <th colspan="2">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>Girls</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Adults</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p style="font-size: small; text-align:center;">Because people may fall into more than one category, your totals may be more than the number of girls and adults registering.</p> | 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 \$ _____<br>Credit Card Charges \$ _____<br>Cookie Credit \$ _____<br><b>TOTAL FROM TROOP \$</b> _____<br><br>Date Submitted to Council: _____<br><br>SU Registrar Initials: _____<br>CDD Initials: _____ |
| 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   |   |       |                           |                              |       |             |                   |                   |  |  |                                   |       |                           |                              |       |             |              |          |       |  |  |  |  |  |  |  |  |        |  |  |  |  |  |  |  |  |   |