



Plan 3P

Enrollment Form for Girl Scout Councils

Council # 688



1. Complete all sections of this form. **Please submit this form 6 weeks prior to the planned event(s).** There is a minimum premium of \$5.00. Several events may be submitted in one request to satisfy the minimum.
2. Submit this form electronically to Travel@girlscoutsww.org or by mail to Girl Scouts Western Washington, Attn: Travel Program Manager, 5601 Sixth Ave S, Suite 150, Seattle, WA 98108.
3. **Do not submit payment with the application.** After the application has been approved, it will be submitted to the finance department for processing; you will receive an electronic invoice from Wufoo Paypal to submit payment.

Service Unit # and Troop #/ Group Name: _____

Visit our [website](#) for safety and insurance-related resources.

Name of Person Submitting Form: _____

By submitting this form, I/ we request that Mutual of Omaha provide Accident Insurance to cover all enrolled participants in the following approved, supervised Girl Scout activities (except statutory employees covered under workers' compensation).

Email Address: _____

Phone Number: _____

Signature of Person Submitting Form: _____

Schedule of Each Event

(1) (2) (3) (4) (5)

Name and Location of Event	Beginning Date	Ending Date	Number Participants	Number of Days	Number Participant Days (1 x 2)	Premium Each Day	Total (3 x 4)
SAMPLE: Troop ##### Bridging Ceremony in San Francisco, CA	02/05/XX	02/09/XX	25	5	125	\$0.70	\$87.50
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
						\$0.70	
Total	N/A	N/A				\$0.70	

Council Use Only

Payment Method: _____

Payment Date: _____

Signature of Approval

Staff Title

Date