

Girl Scouts of Western Washington
River Ranch Day Camp & St. Albans One Day Event Registration

Check www.girlscoutsww.org for the on-line registration and payment information.
 Use a separate form for each participant **and** each session she wants to attend. Complete both sides of this form. Be sure the girl meets qualifications for the program you choose.
 Please print, and remember to sign on the back.

PM

Return with deposit to: Girl Scouts of Western Washington, P.O. Box 770, DuPont, WA 98327-8781.

Camper's name _____ Birth date (Mo/Yr) _____ Age _____ Grade in Fall 2008 _____

Parent/Guardian's name _____ Day Phone (____) _____

Mailing Address _____ Eve Phone (____) _____

City _____ State _____ Zip _____ e-mail _____

Would you like your confirmation via email? Yes No

My camper's t-shirt size (check box) YS YM YL AS AM AL XL XXL

Program Request: Placement in a program is determined by grade level in fall:

1st choice: # _____ Program name _____

or

2nd choice: # _____ Program name _____

or

3rd choice: # _____ Program name _____

St. Albans One Day Event Transportation Options:
 Fee is \$15 RT per day.

DuPont

Tacoma

Purdy

Olympia

Shelton

River Ranch Day Camp Transportation/Extended Care Options:

Bus Service fee is \$50 per week (\$35 short week). Please indicate route and stop below.

Session # : _____ Route: _____ Stop ID: _____ Location: _____

Session # : _____ Route: _____ Stop ID: _____ Location: _____

Extended Day fee is **\$15 per day**. Please indicate days you will need.

Monday Tuesday Wednesday Thursday Friday = **Total # days** _____

Program Fees:	1st Choice	2nd Choice	3rd Choice
Session	\$ _____	\$ _____	\$ _____
Add Transportation	\$ _____	\$ _____	\$ _____
Add Girl Scout Membership \$10	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____

PAYMENT INFORMATION

\$25.00 deposit required unless using Cookie Credits or applying for Financial Assistance in the southern counties.

Check here if you are applying for financial assistance in Northern Counties _____ Southern Counties _____

Check here if you plan to use cookie campership _____ Check here if you plan to use cookie credits _____

Please see cookie sale and financial assistance information on page.....of the camp brochure for more details.

Deposit paid by: Visa _____ MasterCard _____ Check: # _____

Please print name: _____

Signature of card holder **X** _____

Account # _____ Exp. Date _____ V Code _____



River Ranch Day Camp & St. Albans One Day Event Registration Form

(side 2)

Parent / Guardian Information:

Name: _____ Name: _____
Day Phone (____) _____ Day Phone (____) _____
Eve Phone (____) _____ Eve Phone (____) _____
e-mail _____ e-mail _____

Emergency Contact Information:

Person to notify if parents cannot be reached: _____
Relationship to Camper: _____
Daytime Phone (____) _____ Evening Phone (____) _____

Girl Scout Membership

Girl Scouts of Western Washington requires that all of our campers are currently registered members of Girl Scouts during their stay at summer camp. If you are not currently registered, a \$10 membership fee is required with registration.

_____ Camper is a Currently Registered Girl Scout

Troop # _____ Service Unit # (if known) _____ Girl Scout Council _____

_____ Camper is not currently a member and needs to join Girl Scouts of Western Washington (see below).

Girl Scout Membership Form

Complete *ONLY* if not currently a registered Girl Scout for the 2007-2008 membership year (10/1/07 - 9/30/08).

I give permission for my daughter/ward, _____ to join Girl Scouting. I have included my \$10 membership fee with this registration and understand that membership fees are sent to the GSUSA national organization and can not be refunded or transferred.

_____ New Member _____ Re-registering Member

School _____ in City _____

Parent/Guardian Signature _____ Date _____

CONSENT OF PARENT OR GUARDIAN:

As parent/guardian having legal custody of the camper named, who is voluntarily enrolled as a participant in the Girl Scouts of Western Washington resident camp program, I agree to instruct my child to observe rules and regulations governing the activities. I understand that camping programs involve inherent risk and possible injury because of the nature of the activity, even when conducted in a safe manner. I give permission for her to attend camp and participate in all phases of the program including off-site activities and related transportation.

I understand that a statement of her good health is required before she may attend camp. As the parent or legal guardian of the above child, I give permission for the above child to be photographed and/or audio/video taped during this event and for the images and/or recordings to be published, reproduced or distributed by Girl Scouts and its affiliates in all outlets, including but not limited to television, newspapers, internet, council publications, recruitment materials and ads without liability or limitation or claims on my or minor's part. I have read the statements above. I understand the information and agree to allow my daughter/ward to participate in camp.

X _____ Date _____

SIGNATURE OF PARENT OR LEGAL GUARDIAN