



Application for Extended Travel (step 2 of 2)

Complete for travel lasting 3 or more nights, unless travel occurs over a U.S. Federal Holiday weekend.

Complete & submit this form to your Girl Scouts of Western Washington staff representative after your **Intent for Extended Travel Application** has been approved and prior to the deadlines outlined below. You will be notified of the status of your application within 10 business days of submission.

If any trip information (itinerary, roster, etc.) changes between the date submitted and the date of the trip, you **must submit** the updated section.

Due 1 month prior to in-state travel
Due 4 months prior to out-of-state travel
Due 6 months prior to international travel

Today's Date:		Group Name/Troop No.:		Service Unit:	
Trip Advisor Name:					
Best phone number to reach you:			Email:		
# of Participants: ___ Daisy ___ Brownie ___ Junior ___ Cadette ___ Senior ___ Ambassador ___ Adults					
How many girls have completed the Teen Travel Workshop*? ___ <small>*The Teen Travel Workshop is designed to give girls the tools they need to be active participants in the trip planning process. This is <u>highly recommended</u> 12-24 months prior to your trip.</small> Have all the adults completed the Travel Planning with Girls Workshop*? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>*The Adult Travel Workshop teaches adults the basics of trip planning and how to make it a girl led process. The workshop is mandatory and recommended at least 18-24 months prior to your trip.</small>					
Type of Trip: <input type="checkbox"/> In Council <input type="checkbox"/> Out of State <input type="checkbox"/> International					
Dates Traveling:			Places Traveling:		
Are there high-risk activities on this trip? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what activities? (attach additional pages as needed) ___ <small>*Girl Scouts of Western Washington must have a current Certificate of Insurance for any vendors offering high-risk program activities, such as horseback riding, rafting, climbing, etc. To learn more, visit Insurance 101.</small>					
Please discuss Girl Scout Leadership Experience Outcomes as a group and indicate which outcomes will be achieved through this travel experience and explain. For more information please visit Our Program.					
<input type="checkbox"/>	Strong Sense of Self	<input type="checkbox"/>	Positive	<input type="checkbox"/>	Challenge Seeking
<input type="checkbox"/>	Healthy Relationships	<input type="checkbox"/>	Community Problem Solving		

Initial next to each statement to indicate understanding:

1. ___ [Additional insurance](#) is due 4 weeks prior to in state and national travel and 6 weeks prior international to travel. My insurance is due by _____ (dd/mm/yy)
2. ___ All applicable travel forms and paperwork listed on the [Travel Page](#) of the Girl Scouts of Western Washington website will be completed in a timely manner.
3. ___ All participants will be actively registered members at the time of travel.
4. ___ For international trips all participants must be 12 at time of trip.

Troop Emergency Contacts

Adults not traveling to contact in case of emergency to relay information to families.

Name	Preferred Phone Number (cell, home)	Alternative Phone Number (Cell, home, work, etc.)

Participant Roster

If you need more space, or have your own participant list, you may attach a typed roster to end of this form.

This roster will be used to identify participants in case of an emergency.

Please note that girls must be at least 12 years of age at time of trip for international travel.

Number of People	Participant Name	Date of Birth	Adult or Girl	Emergency Contact Name (Adult not on trip)	Emergency Contact Phone
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Adult Training

The adults listed below have completed the trainings, workshops, and/or certifications required for this trip and are able to perform in their designated capacities.

Name	Certification / Workshop (First Aid/CPR, Travel Workshop, Lifeguard Certification, etc.)	Date Completed	Expiration (If Applicable)

Types of Transportation Planned

Plane, Private Vehicle, Etc.

If traveling by private vehicle, complete the following chart:

Private Vehicle

All drivers are properly licensed and all vehicles are registered, insured, maintained and have a seat and seatbelt for every passenger. List additional driver(s) information on a separate paper.

Name	Driver's License #	Insurance Company	Policy #

Trip Budget:

If you have another budget form that you are using that includes the same information, you may submit that.

Income: from money-earning events, council product sales, scholarships, etc.		Amount
Council product sales		
Money-earning		
Scholarships		
Cookie Dough		
Other:		
Total Income:		
Trip Expenses: costs of pre-trip activities, the trip and post-trip activities		Amount
Pre-trip Costs	Teen Travel Workshop (~\$10/girl free for adult advisor)	
	Meetings and events (activities and supplies, site rentals, etc.)	
	Food	
	Transportation	
	Patches, group t-shirt, thank-you gifts, etc.	
	"Shakedown" Practice travel event	
	Other:	
Trip Costs	Airfare	
	Lodging	
	Transportation	
	Food	
	Activities	
	Registration Fees	
	Insurance (~\$1.50 per person per day through GSWW)	
	Other:	
Post-trip Costs	Memorabilia	
	Reunion	
	Other:	
Sum:		
Trip Buffer (Girl Scouts recommends budgeting an additional 10% over trip costs to cover higher prices, incidentals that arise, etc.)		(10% of the sum)
Total Expenses (sum and buffer):		
cost per person:		
Cost per person if fewer people participate:		

