



Mutual of Omaha

Plan 2 Enrollment Form for Girl Scout Councils Council # 688



1. Complete all sections of this form. **Please submit this form 4 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 your Volunteer Support Manager (VSM) or by mail to Girl Scouts Western Washington, Attn: Insurance, 5601 Sixth Ave S, Suite 150, Seattle, WA 98108. If you do not know who your VSM is, please call 1 (800) 541-9852 or email customercare@girlscoutsww.org.
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 @ 11¢	Total (3 x 4)
SAMPLE: SU ### Encamporee at Lyle McLeod, Tahuya, WA 98588	02/05/XX	02/09/XX	25	5	125	11¢	\$13.75
						11¢	
						11¢	
						11¢	
						11¢	
						11¢	
						11¢	
						11¢	
						11¢	
						11¢	
Total	N/A	N/A				11¢	

Council Use Only

Payment Method: _____

Payment Date: _____

Signature of Approval

Staff Title

Date