girl scouts of eastern missouri

The Event Packet: District/Neighborhood Events

Use one packet per event. Keep the packet intact and complete forms in packet as needed per event. Your Neighborhood Team Chair or District Chair will give you the additional forms needed (NCR or forms turned into the Council office, marked sample in the packet). You may make copies of any forms not marked sample. Bring the packet with you to all Neighborhood Meetings while event is being planned. At completion of event give the completed packet to your Neighborhood Team Chair or District Chair for future reference. NTC/DC will keep a file of all events. Turn in event evaluations and evaluation summary to your Community Development Manager. (CDM).

District _____ Neighborhood _____Event Date _____
Event Name _____
Event Location_____

☐ Application Submitted _____ Date

☐ Event Director Name/s, Phone, Email _____
_____

☐ Business Manager/Registrar Recruited Name/s, Phone, Email _____
_____

☐ First Aider Recruited Level 1 less than 200 participants_____ Level 2 more than 200 participants_____
Name, Phone, Email _____

☐ Non-Member Insurance Submitted _____ Date or N/A_____

☐ Event Flyer Submitted to CDM _____ Date. Approved by CDM _____Date.

☐ CERTIFIED Water personnel Per *Safety Activity Checkpoints* __ Life Guard, ___Boating, ___ Watcher.
Name/s, Phone, Email_____
Name/s, Phone, Email_____
Name/s, Phone, Email_____

☐ Licensed Troop Camper/s ___ Recruited or N/A_____
Name/s, Phone, Email _____
Name/s, Phone, Email_____
Name/s, Phone, Email_____

☐ Cooking for Crowds at Camp Certified Person_____
Name, Phone, Email _____

☐ Transportation (please refer to *Safety Activity Checkpoints, Volunteer Essentials and GSEM Essentials available online at www.girlscoutsem.org)*
Bus_____ Train_____ Van_____ Airplane_____Other _____
If commercial vehicle company name, contact and phone _____
_____

F-10
MBJ/mff/tcb
Rev. 3/16/12

Table of Contents

School Events ----------3
Event Forms Checklist ---------- ----------4
Event Time Line ----------4-5
Event Committee Members & Responsibilities ---------- --6-7
Use of Council Owned Sites for District/Neighborhood Events ----------8
Insurance and Hold Harmless ---------- 9-10
Providing Adult Education Courses at Events----------10
Event Flyers ----------11-12
Event Flyer Sample- ----------13
Confirmation Letters-Special Needs Accommodation and Planning ----------14
Accommodation Checklist-Event Evaluation Guidelines----------15
Form F-11 Sample---------- ---------- --16
Activity Scholarship Application----------17-21
Event Notification for Activity Scholarship for District/Neighborhood Events----------22
Form F-15 ----------23-24
Form F-16 ----------25
Form F-17 ---------- ----------27
Form F-17a ---------- ---------- ---28
Form F-18----------29
Form F-20 ---------- ---26
Form F-24 ---------- ---30
Form F-25 ---------- ----31
Event Forms Index ---------- ----32
Community Development Manager Phone Listing by District ---------- ----33

girl scouts of eastern missouri

The Event Packet: School Events

Event Application

- Applications can be obtained from your Neighborhood Team Chair
- Must be turned into Neighborhood Team Chair 2 months before scheduled event

Non-Member Insurance

- Must be turned into Community Development Manager 3 weeks before scheduled event

Budget

- Prior to budgeting for the event, contact the Financial Chair to check if there are available funds in your school's funds
- 4 months prior to event, complete Initial Budget Form F-15 and submit to Neighborhood Team Chair for approval, prior to establishing the cost to attend the event
- Use Tax Exempt form whenever possible for purchases
- Begin documenting expenses on Form F-16
- Event Fees-troop check should be made to the Neighborhood
- 3 months prior to event, continue to update Form F-16
- 2 months prior to event, continue to update Form F-16; prepare and revise budget (Form F-15)
- One month prior to event, submit event fee checks to Neighborhood Treasurer and request funds from Neighborhood Treasurer
- Within one month following the event, submit all receipts for reimbursement to Neighborhood Financial Chair. Submit final budget paperwork to Neighborhood Financial Chair

Event Account Worksheet

- Must be turned into Neighborhood Financial Chair following event for reimbursement
- Receipts must be attached

Event Evaluation

- Distribute event evaluations to all participants/troops upon completion of the event

Service Project
Follow instructions from Neighborhood Seasons of Giving Coordinator for reporting donations collected as a Service Project at each event

girl scouts of eastern missouri

Event Forms Checklist

Every Event Will Need:

- ❑ Event Application.....(sample in packet, form available from Neighborhood Team Chair).....F-11
- ❑ Flyer (every flyer must include Girl Scouts of Eastern Missouri District # and Neighborhood #)
- ❑ D/N Event G/A Participant Survey (each troop/group completes at end of event)...(you may copy form in packet or request forms from Neighborhood Team Chair)..... .....F-17
- ❑ D/N Event G/A Participant Survey Recap....(committee completes from compiled F-17's collected at event. Completed F-17a goes to your CDM)... (you may copy form in packet or request forms from Neighborhood Team Chair) F-17a

For Every Event Determine The Need:

- ❑ Worksheet for Budgeting for D/N events (if finances are involved)...(use form in packet).....F-15
- ❑ Event Account Worksheet (if finances are involved)...(use form in packet).....F-16
- ❑ Registration Check-in Grid (very helpful)...(you may copy form in packet).....F-20
- ❑ Activity Scholarship Notification for D/N events (a MUST for participants to be able to apply for and/or receive scholarships)...(sample in packet form from Neighborhood Team Chair) PD-3
- ❑ D/N Event Service Survey (use if Girl Scout Cadette, Seniors and Ambassadors are working event as a service project. Each Girl/Troop/Group completes at end of event) (copy form in packet or request forms from Neighborhood Team Chair) F-24
- ❑ D/N Event Service Survey Recap (use if Girl Scout Cadette, Senior and Ambassador worked event. Committee completes from compiled F-24's) goes to CDM...(copy form in packet or request forms from Neighborhood Team Chair F-25
- ❑ Non-Member Insurance (if you expect event participants who are not registered Girl Scouts) Your CDM will complete this form for you. Submit a check payable to United Life of Omaha to your CDM who will complete this form.

Event Timeline
FOR EVERY EVENT

1 year to 6 months prior to event:

- ❑ Submit appropriate event application to your CDM: Form F-11

6 months prior to event:

- ❑ Review Event Packet
- ❑ Determine whether the event will include participants (girl, adult, or other family members) who may not be registered Girl Scout members
- ❑ If there are participants attending the event that are not registered members of the Girl Scouts, non-member insurance must be purchased. (see page 9 for details) Submit a check made payable to United of Omaha Life Insurance to your CDM with event application F-11. Your CDM will fill out and submit the form to the insurance company.
- ❑ Request a Certificate of Insurance (COI) from the facility where the event is taking place naming GSEM as additional insured. This can be obtained by either visiting, calling, writing or sending an email to the facility. Also, you can ask for assistance and a sample letter from your CDM.
- ❑ If a contract is required by location, submit event location contract to Girl Scouts of Eastern Missouri, Inc. (if contract includes a hold-harmless clause do not sign--see page 10) Contracts and agreements need to be made in the name of Girl Scouts of Eastern Missouri, Inc.
- ❑ Request a Certificate of Insurance from GSEM's Accounting Department if the non-Council owned site requires proof of insurance (see page 9)
- ❑ Event committee personnel recruited (see pages 6-7)
- ❑ First event committee meeting held

4 months prior to event:

- ❑ Complete initial budget Form F-15 (see page 24) if needed
- ❑ Submit sample flyer to CDM for approval before distribution (remember to include the cost of flyer printing and distribution into the budget)
- ❑ Arrange transportation (if applicable)
- ❑ Begin documenting expenses on Form F-16 (*Event Account Worksheet)* see page 25

3 months prior to event:

- ❑ Distribute flyers at District/Neighborhood Meeting, post on District/Neighborhood Website.
- ❑ Update Form F-16 (*Event Account Worksheet)*

2 months prior to event:

- ❑ Register participants and mail confirmation letters
- ❑ Submit the application for those participants needing scholarships retrieve form on website (see page 17-19)

- ❑ Fill out Form F-20 as a tool to help plan for the day of the event (see page 26)
- ❑ Update Form F-16 (*Event Account Worksheet)*
- ❑ Prepare and revise budget (Form F-15)
- ❑ Order patches

Six weeks prior:

- ❑ *Cancel any unused units in writing to Camping Resource Specialist (any units not canceled 6 weeks prior will be charged to event.)
- ❑ *Return invoice with payment for camp fees (make check payable to Girl Scouts of Eastern Missouri)

One month prior:

- ❑ Submit event fees to and request funds from District/Neighborhood Financial Chair
- ❑ Secure supplies (food, toiletries, etc.) and equipment.

Day(s) of Event:

- ❑ Utilize Form F-20 to track participants attending (see page **26)**
- ❑ Ensure that a Health History (Form F-56) is received from all participants
- ❑ Distribute evaluations (Forms F-17, and F-24) to all participants upon completion of event (see pages 27 & 30)

1 month following the event:

- ❑ Submit final budget to District/Neighborhood Financial Chair
- ❑ Hold evaluation meeting with committee personnel
- ❑ Complete and submit evaluation recap forms (F17a, F-18, and F25) to CDM, Director of Research and Evaluation and District/Neighborhood Team Chairs
- ❑ Report results of any service projects through www.girlscoutsem.org/programs/seasons of giving

*****NOTE: When using a non-Council owned site, be sure to pay close attention to site policies for making cancellations and payment to avoid any charges.

girl scouts of eastern missouri

Event Committee Members

and Responsibilities

A District or Neighborhood Event is an intertroop/adult activity organized at the local level. Such an event should be decided by a vote of the District committee or the Neighborhood Association conducting the event. A School Event is an inter-troop/adult activity organized at the school level. Such an event should be decided by a vote of the school's troop leaders.

It is the decision of the District/Neighborhood Association as to which age levels may attend the event and/or stay overnight (if overnight event). Girl Scouts Daisies may stay overnight if the event is a leader-daughter or mother-daughter type of event (each girl has her own mother/female adult attending). Men staying at camp need separate housing and bathroom facilities from girls and female adults.

The event committee will plan for the diverse membership within the District or Neighborhood (for example, arrangements for people with disabilities, religious observances, etc.)

Following are some example of possible event committee members:

Event Director

- Is appointed by and will be responsible to the District Chair for District Events or the Neighborhood Team Chair for Neighborhood Events
- Recruits a committee based on the type and needs of the event
- Consults with the committee to set up time and location of event meetings including a final evaluation meeting
- Will notify the District/Neighborhood Team Chair (D/NT Chair) and the Community Development Manager in advance of the time and place of each committee meeting
- Distributes a committee roster to the D/NT Chair, Community Development Manager and Event Committee

Business Manager

- Submits initial and final budget under advisement of the event committee to the Event Director and the District/Neighborhood Treasurer
- Collects event fees and submits to the D/N Treasurer
- Collects receipts and bills from event committee members and submits to D/N Treasurer for payment

Event Registrar

- Collects event registrations and event fees, if mailed w/ registrations, and submits to the Business Manager.
- Gives tallied information to the necessary event committee members
- Mails confirmation letters
- Handles questions and calls from the participants
- Distributes, collects and tallies evaluations and submits to Event Director.

(Event Registrar and Business Manager is often the same person)

Program positions

- Plans the program for the event with the assistance of the committee
- Also responsible for contacting program facilitators, guest speakers, trainers, etc.
  The program committee may consist of: opening and closing—crafts—day program—songs—evening program—games etc.

Meals/Food

- Plans meals, snacks, etc. with the assistance of the committee
- Assures that dietary needs of the participants are being met (information from the registrar)
- Must take "Cooking for Crowds at Camp" (refer to GSEM *Lead & Learn*) if using kitchens on Council properties
- Secures catering if being used for event

Health Supervisor

- Oversees healthcare at the event and records all incidents, accidents, injuries, illnesses, medications, care provided, etc.
- Must have Level I First Aid Certification (minimum)*

- Must check for head lice on all participants (please refer to Position Papers for more information if over night event)**
- Collects Health Histories from ALL participants, file by troop number, place each troop's Health Histories in an envelope. Health History information is confidential, and must be kept in a secure location accessible to only the Health Supervisor. Return Health Histories to Troop Leader at the end of the event.

*A Level II First Aid certification is required of adults acting as the First Aider at events with more than 200 participants and when certain activities indicate that Level II First Aid certification is needed (see *Safety Activity Checkpoints, Volunteer Essentials*, and *GSEM Essentials* available online at www.girlscoutsem.org). First Aiders will be asked to show proof of CPR certification for both Adult and Child.
**All overnight programs (camping, district, neighborhood and Council events) should involve a check for head lice. The presence of head lice and/or nits will prevent participation in the event. Please see pages 13-14 of Girl Scouts of Eastern Missouri position papers on the proper procedure.

Camp Supervisor
- Is assigned when using Council-owned properties***
- Will live in the quarters as listed on the Guidelines for Year Round Camp Supervisors (see CD-34)
- May not hold another position while at camp. He/she must remain available in case of emergency

Licensed Troop Camper
- One individual on the event planning committee should have Troop Camp A or B to act as a resource during the planning process when planning camping events.

***Event Committees may recruit their own certified Camp Supervisor. Their name and phone number must be submitted to the Camping Resource Specialist by Aug. 1 for Nov.-April events or Dec. 1 for May – Oct. events prior to event. Please be sure to confirm with this person that they are available and willing to attend event before submitting their information. A camp supervisor will be assigned to events who choose not to recruit their own.

CDM Responsibilities
- Attends initial planning meeting and any other meetings if requested by D/NTC
- Advises development and implementation of event
- Approves the event flyer before distribution
- Attends evaluation meeting if requested by the D/NTC
- Applies for non-member insurance if needed, one month in advance
- Approves patch design

TO RESERVE A CAMP FOR A DISTRICT/NEIGHBORHOOD EVENT:

- Fill out an application-District/Neighborhood Events (Form F-11) a year in advance. An Event Pull is done the first of every month for all applications for the month before, i.e., on March 1, 2012, all event applications for February 2013 will be pulled. The Girl Development Director will determine which events will use camp if there is a conflict of dates.
- Submit completed application to your CDM; submit any changes to CDM.
- Obtain a current Troop Camp Information Packet from your CDM. Remember that all rules and regulations that apply to troop camping apply to events.
- If a particular Camp Supervisor is desired, contact that supervisor and list on F-11, otherwise one will be assigned. Supervisors for November-April are assigned August 1st ; May-October are assigned December 1st . Review plans with Camp Supervisors. Camp Supervisors will review camp use and guidelines with certified unit personnel at a pre-camp or at-camp meeting.
- Call Adult Education Manager (314.592.2354 or 314.592.2357, 573.221.0339 or 800.727.4475) if teaching adult education certified workshops or modules. Adult Education Department will pay fees for units used for training.
- Event cancellations or unit cancellations are due in writing to Camping Resource Specialist (314.592.2368) no later than SIX WEEKS prior to event date to avoid being charged for unused units. This also allows time for other troops/groups to fill these units. All units reserved, used and unused, will be charged to the event if not canceled by deadline.
- Return the camp agreement form to the Camping Services Department within two weeks to confirm camp usage intent. Camp agreement form is mailed to the Event Director with invoice for site reservation.

OBTAIN INFORMATION FROM THE CURRENT *Troop Camp Information Packet*:

- Dates that camps are closed: holidays and modern firearm deer hunting season and any managed deer hunting weekends. Dates for hunting season are released in June.
- Note: District/Neighborhood events may not be scheduled during prime time camping: April 22-May 31 and September 15-October 24, nor during resident camp season.
- All Rules and Guidelines
- Public Area Usage Guidelines
- Emergency Procedures
- Specific Requirements for Certifications and Activities
- Arrival and Departure Times

CERTIFICATIONS: ALL CARDS MUST BE REVIWED BY THE CAMP SUPERVISOR

- Pool—Red Cross Aquatic Examiner In-service
- Units—Licensed Troop Camper or Camping Procedures (1 per unit)
- Dining Hall Kitchen—Cooking for Crowds
- Archery—Archery
- Lake—Small Craft Safety plus one of the following: Basic Water Rescue, Lifeguard (with Aquatic Examiner In-service) or Small Craft Safety plus 2 watchers
- Health Personnel—Level I First Aid for under 200; Level II for over 200. Both First Aid and CPR/AED will be needed.
- Pressurized Fuel—Campfires and Pressurized Fuels Course and Level I First Aid
- Fishing—Basic Water Rescue or the equivalent; over 16 Missouri Fishing License
- Nature Center Storage Room Access and Program Presentations—F.R.O.G.
- Outdoor Adventure Course at Camp Tuckaho—Outdoor Adventure Instructors

Note: Additional watchers are required for the pool, lake, and fishing activities.

Certificate of Insurance

Girl Scouts of Eastern Missouri (GSEM) is committed to providing a safe, quality program experience for girls. As part of this commitment GSEM is asking that all facilities where Girl Scout program takes place provide the Council with a Certificate of Insurance (COI) naming GSEM as additional insured. The goal is to insure the venue where Girl Scout program takes place is safe and has adequate insurance.

District and Neighborhood events held off GSEM property should request a COI from the management of the facility. Many facilities have already provided GSEM with a COI. To find out if the site where the event is to be held has provided the Council with one go to www.girlscoutsem.org/ Certificate of Insurance.

The management of the program site may also request that GSEM provide a COI naming them as additional insured on GSEM's policy. This request should be given to the Community Development Manager for follow up.

The event planning committee should work closely with their CDM to fulfill requests for COI or when making a request.

Non Member Insurance

Girl Scouts of Eastern Missouri, Inc. encourages the formal registration of all participants at an event so that they are covered under Girl Scout Activity Accident Insurance. In some situations, however, this may not be possible, and non-member insurance must be purchased (i.e. My Friend & Me event, Family Picnic event, etc.).

Formal registration allows members to participate in all Girl Scout activities for one membership year (October-September). Non-member insurance strictly covers an individual for one activity.

If all participants attending the event are to be registered members of Girl Scouts, registrations must be submitted to the Neighborhood Team Chair prior to the event. Scholarships can be used to register those individuals that are not able to pay the $12 membership fee. The $12 membership fee provides Plan 1 insurance which covers activities lasting no more than 2 nights. This plan does not cover illness. Plan 1 is a secondary insurance.

If some of the participants choose not to become members of Girl Scouts of Eastern Missouri, non-member insurance should be purchased at the time the event application (F-11) is submitted. The types of plans that can be purchased are as follows:
Plan 2: This plan covers Non-Members and can be used for members participating in events of any length. This insurance must be purchased for a non-member to participate in a Girl Scout event of any length. It is secondary insurance and it does not cover illness. Cost is $.11 per person per day with a minimum of $5 premium.
Plan 3: This plan covers members of the Girl Scouts participating in activities lasting longer than 2 nights. Troops purchase this insurance to have added coverage on a trip or for an activity. Cost is $.70 per person per day.

All checks should be made payable to "United of Omaha Life Insurance Company." Please check with your CDM for amount of check and to submit the forms. The insurance form must be filled out with the details of the event and postmarked 24 hours before the day of the event for the insurance is to be active.

District and Neighborhood events are planned and implemented for specific age levels. If a girl is not of the age level for which the event is planned then she is considered a tagalong. The event planning committee should determine in advance if tagalongs will be accepted. If so, a registration process should be put in place and non member insurance should be secured. In addition, tagalongs should provide a signed Health History/Parent Permission Form even if a parent is on the event staff. If there is a unit for boys make sure that the same procedure is followed as for girls. A specific program should be planned and implemented by a boys unit staff especially for boys; boys should not be participating in the event program.

Hold Harmless Clauses

Contracts and agreements need to be made in the name of Girl Scouts of Eastern Missouri. Please refer to the Position Papers.

"Rather than the Council continuing to be involved in the issue of releases from individual participants or their parents, subordinate units (troop/district/neighborhood) will administer the completion of any "release" required by outside vendors/venues from individual participants or their parents. No change is recommended related to any release required from GSEM (where GSEM is a legal party to the release), and these will continue to be sent to the Service Center for review and signature by the appropriate Service Center management. It should also be noted that the responsibility of the Council and/or subordinate unit to reasonably ensure that the venue we are utilizing is safe for the girls remains unchanged, regardless of who administers and/or signs the actual release."

What this means is if the venue where the district or neighborhood event is to be held asks for each girl to have a signed release (if a girl is not of legal age, age 18, her parent must sign. Leaders may not sign on behalf of parents) it can be signed. If the venue asks for GSEM to be named as the contracting entity and/or legal entity, then the agreement/contract must be reviewed and authorized by GSEM. The Community Development Manager will help facilitate the signature process. Please remember to allow at least two weeks for this to be completed. For more information about Hold Harmless/Indemnification Procedures please refer to Position Papers.

Providing Adult Education Courses at Events

Volunteers are often pleased when they can meet an educational need during an event. It is a decision made by the event committee to offer courses and workshops during events. Workshops can currently be applied toward earning Personal Development Certification if they meet the following criteria:

1) They are least one hour in length
2) An evaluation is completed by participants at the conclusion of the workshop
3) An outline is submitted to the Adult Education Manager at the Girl Scout Service Center at least six weeks before the course

If the event committee decides to offer an adult education course or workshop during their event, they must coordinate with the district training team to ensure duplication of courses can be avoided, statistics are maintained and learning facilitators are recruited appropriately. For more information, please contact your District Volunteer Development Manager or the Adult Education Manager at: 314.592.2354, 573.221.0339, 314.592.2329 or 800.727.4775.

Event flyers must be submitted to the District Chair or Neighborhood Team Chair and the Community Development Manager for approval at least one month prior to distribution. Please remember to include the cost of printing flyers in the initial budget. Flyers should **not** be printed until the Community Development Manager approves them.

Required information on all event flyers:

- ❑ Identifying information—Girl Scouts of Eastern Missouri.
  District ___, Neighborhood ___
- ❑ Refund policy – refund deadline (should also be included in the confirmation if applicable)
- ❑ Disability Information/Accommodation Request (example below)

Questions that should be answered on the flyer:

- ♦ What is the event?
- ♦ Who is invited?
- ♦ Where will it be?
- ♦ How much will it cost?
- ♦ How do I register?
- ♦ When can I register?
- ♦ Can I get a refund?
- ♦ When is the registration and/or refund deadline?
- ♦ Will I get a confirmation letter?
- ♦ Will transportation be provided?
- ♦ Who can I contact if I have questions?

Other helpful hints to make your flyer look attractive:

- ♦ Clear, concise, readable type
- ♦ Use a maximum of 2 fonts
- ♦ Contain margins on all four edges (one inch is recommended)
- ♦ Proofread carefully and check facts to ensure all of the information is correct
- ♦ Include artwork
- ♦ Print on colored paper
- ♦ Flyers that include a tear-off registration form should contain pertinent information regarding the event on the top portion of the flyer
- ♦ Refer to examples on page 13)

(Continued on the next page)

Race/Ethnic Background (optional)

This information is requested only to measure progress towards serving all girls and adults in our jurisdiction. Please check:

Girls: __White __Black __Asian/Pacific Islander __American Indian or Alaska Native __Spanish/Hispanic origin

Adults: __White __Black __Asian/Pacific Islander __American Indian or Alaska Native __Spanish/Hispanic origin

Disability Information/Accommodation Request

Disability Information

GSEM welcomes the participation of all girls and adults and will make reasonable accommodations to persons with disabilities. To help GSEM better serve your girls, please indicate whether or not any of the participants are in need of a reasonable accommodation in order to fully participate in the program. Lucretia Penn, Disability Coordinator, will contact you to answer questions and discuss accommodation requests. You can also contact her directly at 314.592.2337 or *lpenn@girlscoutsem.org*.

Do you need a reasonable accommodation? Yes _____ No _____

You should adapt the statement to be appropriate to event type, i.e. adult individual girl, troop

Individual Girl Event

Disability Information

GSEM welcomes the participation of all girls and adults and will make reasonable accommodations to persons with disabilities. To help GSEM better serve your child, please indicate whether or not the participant is in need of a reasonable accommodation in order to fully participate in the program. Lucretia Penn, Disability Coordinator, will contact you to answer questions and discuss accommodation requests. You can also contact her directly at 314.592.2337 or *lpenn@girlscoutsem.org*.

Do you need a reasonable accommodation? Yes _____ No _____

Girl Scouts of Eastern Missouri

and
District 12, Neighborhood 11
Present
DiscoDays

February 24, 2008

Where: Marquette High School Gymnasium
2351 Clarkson Rd
Chesterfield, 6

Who: Any registered Girl Sc nd her figure (dads, brothers, uncles, granddads, etc.)

Cost: $10 per couple each additional girl

Regist ns s Janua d closes when full or on February 12 2008, whichever comes first. Please detach t the f and mail along with a stamped self addressed envelope to:

12 C Way

ff 63005

ers will be mailed in your retu g the we February 12th.
directions and tickets.

Sorry, There will be no refu Que ??? Cindy Fox (636) 555-1212
(Detach

Girl's Name_____ Tro _____
Adult's Name_____
Address_____ Zi _____
Phone:_____

Couples_____ X $10 = $_____
Additional _____ X $5 = $_____
(Checks ONLY payable to GSEM) Total: $_

Race/Ethnic Background (optional)
This information is requested only to measure progress towards serving all girls and adults in our jurisdiction. Please indicate the total number in each category:
Girls: __White __Black __Asian/Pacific Islander __American Indian or Alaska Native __Spanish/Hispanic origin

GSEM welcomes the participation of all girls and adults and will make reasonable accommodations to persons with disabilities. To help GSEM better serve your girls, please indicate whether or not any of the participants are in need of a reasonable accommodation in order to fully participate in the program. Lucretia Penn, Disability Coordinator, will contact you to answer questions and discuss accommodation requests. You can also contact her directly at 314.592.2337 or *lpenn@girlscoutsem.org*.

Do you need a reasonable accommodation? Yes _____ No _____

SAMPLE

Confirmation Letters

Confirmation letters should be mailed at least 3 weeks in advance of event date.

Required information on all confirmation letters:

- ❑ Identifying information—Girl Scouts of Eastern Missouri—District __, Neighborhood __
- ❑ Name and date of event
- ❑ Refund Policy—refund deadline (should also be indicated on the flyer)
- ❑ Weather policy (i.e. will the event get cancelled if it rains? If it snows?)
- ❑ Disability Information—special needs statement and questions (see page 12)
- ❑ A map or directions to event location

Questions that should be answered on the confirmation letter:

- ♦ What time should we arrive?
- ♦ Where will everyone meet upon arrival?
- ♦ What time will the event end?
- ♦ Where will I be picked up (if transportation will be provided)?
- ♦ What do I need to bring?
- ♦ Is additional money needed for snacks, souvenirs, etc?
- ♦ Who can I contact if I still have questions?

Special Needs Accommodation and Planning

Advance planning is the key to ensuring a positive experience for all event participants, and can be particularly important when including a girl or adult who has a disability. Keeping in mind the information below during the early planning stages of an event can help the committee when making determinations regarding all aspects of the event including location, facilities, activities, menu, etc.

- ❖ Every event flyer must have the "Disability Information/Accommodation Request" (see page 12 and sample flyer provided in the event packet) included so the Disability Coordinator can determine what (if any) accommodations are needed to ensure the full participation of all participants.
- ❖ As event registrations form are received, it is the responsibility of the Event Director (or Registrar) to call the Disability Coordinator and provide a copy of the event registration forms that have indicated that a reasonable accommodation is needed. The Disability Coordinator will call the parent or troop leader to discuss the request for accommodation and communicate the need to the Event Director (or Registrar). This will prevent surprises and encourage Girl Scouts members to keep in mind that all of us have different needs and abilities, and flexibility is always required when planning and implementing large events.
- ❖ It is important that all event committees are aware of what accommodation should be made, since this might also affect their areas as well. For example, a girl who uses a wheelchair would be assigned the accessible unit at camp, but the program and transportation/parking committees will also need to know so that all activities are held in an accessible area, and any special transportation needs are taken into account.
- ❖ Sometimes committee members are not aware of a special need or request from a participant until the day of the event. Chances are good that if you have chosen an accessible facility and considered how participants of ALL abilities can participate in the activities you will not have any problems making a change. Occasionally, however, an adaptation or accommodation may be necessary at the last minute, so it is important to do so creatively and graciously! For example, perhaps a girl with diabetes discovers that none of the snacks provided during an event are something that she can eat. Consult with the food committee and the girl's leader (and even the girl herself) to come up with an acceptable alternative so that the girl will feel neither hungry nor left out at snack time. There is always a solution, and consulting with those involved and making compromises is what will get you there easily.
- ❖ Support is available for volunteers who are planning an event and need assistance with accommodation requests. Please call Lucretia Penn, Disability Coordinator at 314.592.2337 or lpenn@girlscoutsem.org.

Accommodation Check-List

When looking at a potential event location it is important to check all areas; one part may be accessible while another may not. Use the following questions as guides for finding sites that are accessible to everyone. A girl, parent or guardian, or other persons visiting your event may have other special needs that will be listed on the accommodations, be sure to include them.

- Does one accessible route connect all building and facilities on the site?
- Are there reserved parking spaces for people with disabilities?
- Are there curb cuts so that people using wheelchairs, carriages, carts, etc., can enter and exit more easily?
- Are there tactile marking in the sidewalks in the front of the curbs to warn people who are blind?
- Is there a ramp at the entrance to the building?
- Have handrails been installed?
- Does the hallway allow enough space for one wheelchair to travel comfortably? Is there enough difference in surfaces for people who are blind to get clues?
- Are door openings at least 32 inches wide?
- Are door numbers in Braille?
- Are bathrooms on an accessible pathway?
- Is there at least one stall with handrails that could be used comfortably by a person in a wheelchair?
- Are fire alarms low enough to be reached by people in wheelchairs? Are the directions in Braille? Are they equipped with flashing lights so that people with hearing impairments can be warned?
- Are chairs and tables of an appropriate height? Can a wheelchair fit under at least one table, or can one be accommodated easily in an aisle?
- Do any cabinets or counters stick out into pathways?
- Can all areas be seen without a glare?
- Have special materials and equipment that will be needed identified?

Event Evaluation Guidelines

It is very important to evaluate the Girl Scout programs and provide measurable proof of the program outcomes. Funders, parents, prospective volunteers, and current volunteers and staff utilize this information. The committee can help in the collection of such information by using an evaluation for all events.

You may use the girl evaluation tool (F-17) as it is printed. To facilitate evaluation, the leaders may survey the troop as a whole on the Girl Scout Daisy and Brownie levels. The adult(s) can read the questions to the Girl Scouts and record the total number of answers on F-17. Individual evaluations are desirable on the Girl Scout Junior, Cadette, Senior and Ambassador program levels, but not mandatory. If you design your own evaluation, please include questions 1-10. If Girl Scout Cadettes, Seniors and Ambassadors assist in program delivery, please provide them with the Service Survey (F-24). It is important to ask the adults at your event to provide feedback on the logistics of your event. See Part B on F-17.

You may use the attached form (F-17a) to summarize the District/Neighborhood Event Girl Participant Evaluations (F-17). Please complete the total number of responses, the program level of the girls responding, and the number of responses for each question. You may summarize the comments for the activity questions and suggestions for future events. If you have any questions about the evaluation of your event, please call your Community Development Manager. Please submit this F-17A recap to your Community Development Manager, District/Neighborhood Summary of Participation, (F-18) and the District/Neighborhood Event Service Survey (F-25) recap if applicable, no later than four weeks after your event.

girl scouts of eastern missouri

APPLICATION FOR DISTRICT/NEIGHBORHOOD EVENTS

Date Submitted_____ District _____ Neighborhood_____Event Year_____.

Program/Age Levels [circle all that apply]: D B J C S A Adult

Event Date/s _____(if **NOT** requesting camp use) Overnight Event _____Yes _____No

Name of Event _____

Event Location _____

Event Director _____[D] _____[E]_____

Address_____City/Zip_____

Certified Camper (for events at camp) _____

D/N Leadership Team Chair Signature _____ Date _____

*SUBMIT TO THE PROGRAM DEP. PD-3 EVENT NOTIFACATION FORM FOR ACTIVITY SCHLORSHIPS AT DISTRICT/NEIGHBORHOOD EVENTS.

CEDARLEDGE			TUCKAHO			FIDDLECREEK		
Unit	Cost		Unit	Cost		Unit	Cost	
Ahwenasa	$40		Covered Wagons	$40		Happy Acres	$40	
Totem Village	40		Prairie Schooners	40		Pleasant Valley	40	
Cypress Meadows	55		Dogwood Dell	55		Hill & Dale	40	
Glen	55		Persimmon Patch	55		Glen & Vale	40	
Gypsy Dell	40		Raccoon Ridge	55		Ridgetop	40	
Daisy Dell	40		The Village	40		Hilltop	40	
Kiamecia	55		Sun Flower Meadow	40		Gaylord	70	
Skyview	55		Merry Oaks	55		Sequoia	70	
Tanda	55		Log Cabins	40		Dogpatch	35	
Timber Trails	55		Frontier Village	40		Day Outing	-0-	
Border Village	40		Tree Houses	40		Kitchen	60	
Cliffs End	40		Maple Grove	40				
Bright Star	60		Boones Loft	70				
Rocky Ledges	40		Carver House	70				
Boulder Ledges	40		Sacajawea	70				
Luckystone Lodge	60		Tuck East	70				
Manor House	60		Tuck West	70				
Petite Chalet	60		Hickory Lane	35				
Gail's Place	70		Mystery Pond	30				
Wohl Lodge	70		Green Ridges	-0-				
Prim Lake	35		Kitchen	60				
Whispering Winds	35							
Conestoga	35							
Day Outing	-0-							
New Dining Hall Kitchen	60							

Request for Camp Use

Date of Event:
1st Choice_____
2nd Choice_____
3rd Choice_____

Location of Event:
1st Choice_____
2nd Choice_____
3rd Choice_____

Note: No District/Neighborhood Event Camping April 22-May 31 and September 15-October 24. (on council owned property)

*Other facilities and equipment required: (canoes, pool, activity areas, etc.)_____

**Camp Supervisors Name:

Phone:_____

(Supervisor will be assigned if not listed here. Submit requests to camp department by August 1st for November-April events or December 1st for May-October events.)

**Note: Please confirm availability with Camp Supervisor before listing.

* Camp use for events F11 due one year before event date (ie: by April 30th for events the following April)
*Note: Public use areas and facilities are still open for public unless the event has the entire camp (every unit) reserved and confirmed.

For Service Center Use Only

Approval for Camping & Non-Camping Events: Girl Development Department Approval

Community Development Manager _____Date _____

Assistant Director, Girl Development _____Date _____

Routing: 1.CDM: – White 2. Event Director - Canary 3. Neighborhood Team Chair/District Chair - Pink *Event Director sends copies to: Event Business Manager and D/N Press Rep.

Approval for Camping Events: Camp Department Approval

Camping Resource Specialist _____Date _____

Director, Camping Services and Facilities_____Date _____

Routing: 1.Camping Resource Specialist – White – Community Development Manager will make and keep a copy. Above routing stays the same.

F-11
Rev: 7/12
JM

girl scouts of eastern missouri

Activity Scholarship Application

Instructions:

1. Submit one application per Girl Scout, per program. Keep a copy for your records.
2. Current activity scholarship application must be entirely completed to be considered. Incomplete forms will result in a processing delay.
3. Activity Scholarship Application must be sent in with the program registration form to the address listed on the registration form (unless for a District or Neighborhood event or troop camping).
4. Allow four weeks for processing.
5. Refer to Activity Scholarship Guidelines for more information
6. Questions about activity scholarships can be directed to Manager, Registration Services at 314.592.2330.

SECTION A- Individual Girl Requests
Please print clearly. All information will be kept confidential.

1. Legal name of girl _____

Address_____

City_____ State_____ ZIP_____

Day Phone_____ Evening Phone_____

Adult Email_____

Current Program Level (circle) D B J C S A Current Grade _____

Troop #_____Troop Leader_____ District/Neighborhood_____

2. _____ _____ _____
Father's Occupation Employer Work Phone

_____ _____ _____
Mother's Occupation Employer Work Phone

3. Ages of each dependent child in Family:_____ Total People in Household:_____

If you have other children applying for financial assistance, please list their name(s):

_____

4. Check range of total family **gross** income per year (please include child support, social security, public assistance, etc.)

☐ $0 - $9,999 ☐ $15,000 - $19,999 ☐ $30,000 - $49,999 ☐ $75,000 - $99,999

☐ $10,000 - $14,999 ☐ $20,000 - $29,999 ☐ $50,000 - $74,999 ☐ $100,000 and Greater

5. Racial/Ethnic Background (*optional*)
The following information is requested only to measure progress toward serving all girls in our jurisdiction. Please check:

__White __Black __Asian/Pacific Islander __American Indian/Alaskan Native

__Hawaiian/Pacific Islander __Also Hispanic

The registrant's ethnic background is: (please check one) __ Hispanic or Latino __Not Hispanic or Latino

6. Disability Information
GSEM welcomes the participation of all girls and adults and will make reasonable accommodations to persons with disabilities. To help GSEM better serve your child, please indicate whether or not the participant is in need of a reasonable accommodation in order to fully participate in the program. Lucretia Penn, Disability Coordinator, will contact you to answer questions and discuss accommodation requests. You can also contact her directly at 314.592.2337 or *lpenn@girlscoutsem.org*.

Do you need a reasonable accommodation? Yes _____ No _____

7. Last GSEM financial assistance award received: Year_____ Amount $_____

8. Please be specific on the explanation of why you need assistance (e.g. high medical expenses, unemployed, support of aged/disabled family member, etc.)

_____

_____

_____

_____

_____

_____

_____

9. *Please complete for program for which a scholarship is being requested (a separate form is required for each program):*

Name of Program/Event_____

Date(s) of Program/Event_____

Name of Event Registrar (for District or Neighborhood events only)_____

Total Cost of Program/Event per participant $_____

Amount sent with program registration $_____

The following amounts to be contributed from: Family $_____ Troop $_____ Girl $_____ (money earned by girl)

Amount needed: (must complete) $_____

10. Parent/Guardian Signature_____ Date_____

SECTION B- Troop Leader Request (for supplies to make it possible to serve a troop girl with a disability).

1. Name of Troop Leader_____

Address_____

City_____ State_____ ZIP_____

Day Phone_____ Evening Phone_____

Email_____

Current Troop Program Level (circle) D B J C S A Current Grade _____

Troop #_____Troop Leader_____ District/Neighborhood_____

2. Disability Information

GSEM welcomes the participation of all girls and adults and will make reasonable accommodations to persons with disabilities. To help GSEM better serve your girls, please indicate whether or not any of the participants are in need of a reasonable accommodation in order to fully participate in the program. Lucretia Penn, Disability Coordinator, will contact you to answer questions and discuss accommodation requests. You can also contact her directly at 314.592.2337 or *lpenn@girlscoutsem.org*.

Do you need a reasonable accommodation? Yes _____ No _____

3. Racial/Ethnic Background (*optional*)
The following information is requested only to measure progress toward serving all girls in our jurisdiction. Please include totals based on entire troop:

__White __Black __Asian/Pacific Islander __American Indian/Alaskan Native

__Hawaiian/Pacific Islander __Also Hispanic

The registrant's ethnic background is: (please check one) __ Hispanic or Latino __Not Hispanic or Latino

4. Funds to be used for the following:

Program/Event Name Program Date

_____ _____

Program Supplies/Activities:

_____ $_____

_____ _____

Total Requested: $_____

Number of girls to benefit from funds: _____ Date when funds are needed:_____

5. Troop Leader Signature_____
Date_____

For Office Use Only

Initials of Registration staff, approving program acceptance_____ Date_____

Approved amount $_____ Balance due $_____

Signature of approving staff _____ Date_____

girl scouts of eastern missouri

Activity Scholarship Guidelines

The following guidelines are applicable for all activity scholarship requests, including summer programs. However, additional information about summer program requests is included in #3.

1. Activity Scholarships are available for event/program fees in excess of $15 for the following:

- *destinations*
- Council-sponsored programs/events
- Resident camp
- Day camp
- Larks
- District and Neighborhood event Girl Scout participant fees
- District and/or Neighborhood trips (maximum award is limited to 10% of fee, or $150 maximum)
- Troop camping
- Program supplies for troops serving a girl with a disability, which would make it possible for that girl to participate in Girl Scouting with the troop

Activity Scholarships are not available for:

- Troop dues
- Troop trips
- Uniform items
- Insignia
- Awards
- Books and materials
- Adult participation in girl events (please contact Adult Development for information on scholarships for adult education and/or enrichment)
-

2. General information

A. Financial need-based activity scholarships are provided to girls who do not have the necessary funds needed to participate in a Girl Scout program.
B. In order to implement the flexible and innovative programs that meet the interests and needs of all girls, we must use our funds wisely for the largest number of girls.
C. Activity Scholarships will be granted regardless of race, color, ethnicity, creed, national origin, religion, or socio-economic status.
D. The girl must be a registered Girl Scout in GSEM and accepted into a program before scholarship application is considered.
E. Activity scholarships are not awarded for event/program fees that are $15 or less
F. Applications must be received at the Girl Scout Service Center no later than **two** weeks prior to an event.
G. Activity scholarships are non-transferable and valid only for the girl and session for which they are awarded.

3. Financial information

A. The family must demonstrate an actual need for financial assistance (e.g. high medical expenses, unemployment, support of aged/disabled family member, etc.).
B. Disbursal is made based on financial need.

C. Maximum activity scholarship combined total of $150 per year per Girl Scout for all programs except resident camp and *destinations*.
D. Financial assistance is designed to supplement family resources, not replace them. Every effort should be made for a portion of the cost to be paid by the Girl Scout's family, and/or troop. ***Remember; any amount you can contribute allows us to serve more girls.***
E. All details concerning financial assistance requests are kept confidential.
F. Scholarships will not be provided after an event takes place, nor provide reimbursement for expenses already paid.

4. Troop Events

A. Activity Scholarships are not designed to underwrite event costs for an entire troop.
B. Troops should set goals and plan and budget for activities, keeping in mind the cost of planned activities, the member's ability to pay, and the troop's money-earning potential. Doing so provides girls with valuable life skills for self-sufficiency.

5. District/Neighborhood Events

A. Assistance for District and Neighborhood events must be considered as a last resort.
B. The program registration is to be sent to event registrar (not Council), the activity scholarship application is to be sent to the Girl Scout Service Center.

6. destinations

A. If applying for destinations, attach a breakdown of all anticipated trip expenses.

7. Summer Programs Only

A. Activity Scholarships are provided for only one resident camp per girl per year.
B. Scholarships will be considered, initially, for first choice events.
C. Activity Scholarships for summer camp programs are non-transferable and are valid only for the girl and session for which they are awarded.

8. Activity Scholarship Review Process

A. Submit the completed form along with the program registration form to: Girl Scouts of Eastern Missouri, 2300 Ball Drive, St. Louis, MO 63146. If applying online for a resident camp program, mail the activity scholarship form alone to the above address, stating the program registration was done online.
B. Allow **4 weeks** for processing.
C. Notification of the activity scholarship award and the program acceptance is sent together via U.S. mail. The acceptance/rejection letter must be returned prior to the award being processed on the girl's account.
D. A Council check will be sent to the appropriate party for activity scholarship awards for District/Neighborhood events/trips, troop supplies for a Girl Scout with disabilities, and **destinations**.

Contact Manager, Registration Services at 314.592.2330 with any questions regarding activity scholarships.

girl scouts of eastern missouri

Activity Scholarship Event Notification form
District and Neighborhood Events

1. Event Coordinator/Registrar submits Activity Scholarship Event Notification form to Manger, Registration Services, prior to any scholarship application submission so the request can be processed in a timely manner.

2. Event fee requested must be over $15 and are for girl scouts (grades K -12) registration fees only.

3. Each event participant, requesting assistance must submit a completed Activity Scholarship application. Incomplete forms will not be accepted.

4. After activity scholarships are awarded, an award letter is sent to the participant's parent noting award amount and the balance due.

5. Event participant sends "acceptance" portion of Activity Scholarship award letter back to Girl Scouts of Eastern Missouri and the balance due is sent to the event registrar.

6. After the event registration closes (per date below) and once all acceptance letters are received at the service center, a check for the total amount awarded to all participants is mailed to the event registrar listed below.

District _____ Neighborhood _____ Date of Event_____

Name of Event _____

Program Level D B J C S A (circle all that apply)

District Event □ or Neighborhood Event □ (check one)

Registration Opens _____Registration closes_____
(date) (date)

Name of Event Registrar _____Day Phone # _____

Address_____City_____Zip_____

Email Address_____Fax #_____

Event/Program Fee per participant _____Date Activity Scholarship grant money is needed_____

Add any special instructions: _____

_____

Submit this form to: Girl Scouts of Eastern Missouri
Manager, Registration Services
2300 Ball Drive
St. Louis, MO 63146

girl scouts of eastern missouri

Worksheet for Budgeting for District/Neighborhood Events

District_____ Neighborhood_____

Event Name and Date_____

Business Manager_____Phone_____
Email_____

Initial Budget Income	Revised Budget Income	Final Budget Income
Balance from Previous Event = _____ # of girls _____ X _____ fee = _____ # of adults _____X _____ fee = _____ other _____ = _____ _____ = _____ TOTAL = _____ EXPENSES Site/Camp Fee ___ ea. X ____ fee = _____ Transportation _____ fee = _____ Patch/Recognition ___ ea. X ___ fee = _____ Flyer/Printing/Postage cost = _____ Non-member insurance cost = _____ Food per person ____ea X _____ fee = _____ Program Resources Product, crafts, consultants, equipment Other: _____ cost = _____ _____ = _____ _____ = _____ _____ = _____ Total Income _____ Total Expense _____ _____	INCOME _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ Total = _____ EXPENSES _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ Total = _____ Total Income _____ - Total Expense _____ Balance +/- _____	INCOME _____= _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ Total = _____ EXPENSES _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ _____ = _____ Total = _____ Total Income _____ -Total Expense _____ Balance +/- _____

Balance +/- _____	_____	_____

If funds remain, recommended use? _____
District/Neighborhood Team Chair Initial Approval _____
District/Neighborhood Team Chair Final Approval _____
F-15 Rev. 2011
/LP

girl scouts of eastern missouri

EVENT ACCOUNT WORKSHEET

Event Date_____ District_____ Neighborhood_____

Name of and Location of Event_____

Business Manager_____ Phone #_____Email _____

Event Director _____ Phone #_____Email _____

Date	Item	Income	Expenses	Total Cash on Hand
	TOTALS			

Distribution: Business Manager sends copies to – Neighborhood Team Chair – Event Director – Neighborhood Financial Chair

F-16
Mbj 3/12

girl scouts of eastern missouri

Registration Check-in Grid

District_____ Neighborhood _____ Event Name and Date _____

					G/A	Race/Ethnic					
Level	Troop #	#Girls Reg.	# Girls Attnd.	# Adults Reg.	# Adults Attnd	W	BK	Hisp	A/PI	AI/AL	Disabilities

Revised 2007
JS
F-20

girl scouts of eastern missouri

District/Neighborhood Event
Girl and Adult Participant Survey

Name of Event:_____

District _____ Neighborhood _____

Number of girls' responses in each Program Age Level:

D____ B____ J____ C____ S____ A ____ Reg. Adults ____ Non Reg. Adults ____

Part A Read the questions to the Girl Scouts and record the number of yes and no answers.

Did you:

1. Have fun? Yes___ No___
2. Help make your troop's decision to attend? Yes___ No___
3. Discover something you do well? Yes___ No___
4. Choose to help someone? Yes___ No___
5. Learn something you can use in your everyday life? Yes___ No___
6. Try something you'd never done before? Yes___ No___
7. Listen to others in your group when you made a decision? Yes___ No___
8. Feel a part of your Girl Scout Community? Yes___ No___
9. Get to know people who are different from you? Yes___ No___
10. Ask an adult for help when you needed it? Yes___ No___
11. Get to help make your community a better place through a service project? Yes___ No___
12. What was your favorite activity?_____
13. What would you suggest for this event next time? _____

Part B All adults respond.

Number of adults responding on this page:_____

Rate each aspect of this event

	Excellent	Very Good	Good	Needs Improvement	N/A
Program Selection	____	____	____	____	____
Program Activity	____	____	____	____	____
Food	____	____	____	____	____
Facilities	____	____	____	____	____
Publicity	____	____	____	____	____
Confirmation Information	____	____	____	____	____
Logistics	____	____	____	____	____

Suggestions for future events:

_____

_____

F-17
KW/nr
Rev. 3/2/09

girl scouts of eastern missouri

District/Neighborhood Event
Girl and Adult Participant Survey Recap

Name of Event:_____

Event Director's Name _____ Phone _____

District _____ Neighborhood _____ Date____ Location_____

Number of girls' responses in each Program Age Level:
D____ B____ J____ C____ S____ A ____ Reg. Adults ____ Non Reg. Adults ____

Part A Record the number of yes and no answers.

How many girls said:

1. This event was fun. Yes___ No___
2. They helped make their troop's decision to attend. Yes___ No___
3. They discovered something they do well. Yes___ No___
4. They chose to help someone. Yes___ No___
5. They learned something they will use in everyday life. Yes___ No___
6. They tried something they'd never done before. Yes___ No___
7. They listened to others when they made a decision. Yes___ No___
8. They felt a part of the Girl Scout community. Yes___ No___
9. They got to know people different from them. Yes___ No___
10. They got to help make the community a better place through a service project. Yes___ No___
11. They asked an adult for help when they needed it. Yes___ No___
12. Summarize favorite activities.

    _____

13. Summarize suggestions for this event next time.

    _____

Part B Adult responses

Number of adults responding on this page:_____

Rating for each aspect of this event

	Excellent	Very Good	Good	Needs Improvement	N/A
Program Selection	____	____	____	____	____
Program Activity	____	____	____	____	____
Food	____	____	____	____	____
Facilities	____	____	____	____	____
Publicity	____	____	____	____	____
Confirmation Information	____	____	____	____	____
Logistics	____	____	____	____	____

Summarize suggestions for future events: use back of form.
F-17a
KW/nr Rev.3/2/09 Rev. 3/2/09

girl scouts of eastern missouri

District/Neighborhood Summary of Participation

D_____ N_____ Account #_____ Director's Name_____

Date Submitted_____ Address_____

Telephone_____

Email _____

Event: Title_____

Date_____ Type_____

Purpose_____

Location_____

ATTENDANCE:

No. of Girls: D___ B___ J___ C___ S___ A___ Non-Girl Scout_____PEGS_____ Total_____

No. of Troops: D___ B___ J___ C___ S___ A___ Total_____

No. of Adults: Registered_____ Non-registered_____ Total_____

Race/Ethnic Background (optional)

This information is requested only to measure progress towards serving all girls and adults in our jurisdiction. Please indicate the total number in each category:

Girls: __White __Black __Asian/Pacific Islander __American Indian or Alaska Native __Spanish/Hispanic origin

Adults: __White __Black __Asian/Pacific Islander __American Indian or Alaska Native __Spanish/Hispanic origin

DISABILITIES

Girls: Y___ N___ Describe_____

Adults: Y___ N___ Describe_____

Physical Arrangements: Were space, utilities and equipment adequate? Y___ N___

Describe any difficulties_____

Safety: Was there adequate supervision, based on *Safety Activity Checkpoints, Volunteer Essentials* and *GSEM Essentials* available online at www.girlscoutsem.org. Y___ N___

List difficulties, if any_____

Describe activities/programs at the event. _____

_____

_____

Distribution:

White Copy	___ Event Director
Canary Copy	___ Community Development Manager
Pink Copy	___ Neighborhood Team Chair
Goldenrod Copy	___ District Chair
Copy to:	Assistant Director, Girl Development
	Director, Research and Evaluation

F-18
KD/tcb
Rev. 3/19/12

girl scouts of eastern missouri

District/Neighborhood Event

Service Survey

Responses from (check one) Group: ____ Individual: ____

Activity name:_____ Date: _____

Location:_____

If a group, indicate number in group:
Girl Scout Cadettes ____ Girl Scout Seniors _____ Girl Scout Ambassadors _____

A. All girl participants complete this section.

1. I had fun at this activity. Yes____ No____
2. I had to be flexible as I gave this service. Yes____ No____
3. I want to continue to give service in my community. Yes____ No____
4. Did adults help at this activity? Yes____ No____
   If so, did you learn something new about working with other people? Yes____ No____
5. Was training provided for this activity? Yes____ No____
   If so, was the training sufficient? Yes____ No____
6. I would like to do this activity again. Yes____ No____
7. The best part of this activity was:

   _____

9. I suggest the following to improve this activity:

   _____

10. I have participated in this service activity _____ times, including this time.

B. Participants who delivered service to younger Girl Scouts or other children, also complete this section:

1. I learned something new about younger children. Yes____ No____
2. Because the younger Girl Scouts/children were watching me, I became more aware of my actions. Yes____ No____
3. I know more about how to lead younger children now. Yes____ No____
4. I led a part of this activity for younger children. Yes____ No____
5. I think the younger Girl Scouts/children had fun. Yes____ No____
6. They tried something new. Yes____ No____
7. They learned something new. Yes____ No____

C. Participants who helped design the service activity, also complete this section:

1. I said my ideas while planning this project. Yes____ No____
2. I listened to everyone's ideas during planning. Yes____ No____
3. I thought about the point of view of others while deciding. Yes____ No____
4. I voted on the design of this service activity so the goals were met. Yes____ No____
5. I met my responsibilities as a member when my team planned and delivered service. Yes____ No____

F-24
KW/nr
Rev. 3/2/09

girl scouts of eastern missouri

District/Neighborhood Event
Service Survey Recap

Number of responses: Girl Scout Cadettes _____ Girl Scout Seniors _____ Girl Scout Ambassadors _____

C. Record the number of yes and no answers Girl Scouts who said they:

1. Had fun at this activity. Yes____ No____
2. Had to be flexible as they gave this service. Yes____ No____
3. Want to continue to give service in my community. Yes____ No____
4. Were helped by adults at this activity. Yes____ No____
5. Learned something new about working with other people. Yes____ No____
6. Would like to do this activity again. Yes____ No____
7. Summarize comments

   _____

8. Summarize comments

   _____

9. Record number in each range.

   First time _____ Two/three times _____ More than three times _____

B. Record the number of yes and no answers Girl Scouts who said they.

1. Learned something new about younger children. Yes____ No____
3. Became more aware of their actions Yes____ No____
3. Know more about how to lead younger children now. Yes____ No____
4. Led a part of this activity for younger children. Yes____ No____
5. Think the younger Girl Scouts/children had fun. Yes____ No____
6. Think the younger children tried something new. Yes____ No____
7. Think younger children learned something new Yes____ No____

C. Record the number of yes and no answers Girl Scouts said they:

1. Said their ideas while planning this project. Yes____ No____
2. Listened to everyone's ideas during planning. Yes____ No____
3. Thought about the point of view of others while deciding. Yes____ No____
4. Voted on the design of this activity so the goals were met. Yes____ No____
5. Met their responsibilities as a member when their teams planned and delivered service. Yes____ No____

F-25
KW/nr
Rev. 3/2/09

Position Papers

- Girl Scouts of Eastern Missouri developed Position Papers to address issues of concern to the membership of the Council. These papers address the rational for the Council's position, any background information relative to the position, and the Council's position. Please refer to the following papers, which pertain to areas of particular importance for District/Neighborhood events:
- Adults as Advisors When Girl Scout Cadette, Senior, and Ambassadors Girl Scouts Serve as Program Leaders/Aides
- Appropriate Girl Scout Songs and Skits
- Co-ed Program Activities/Service Projects
- Contraband Material at Girl Scout Activities
- Helicopter Display Guidelines
- Lice
- Pressurized Fuel Appliances
- Girl Scout Ambassador as Adult Leaders
- Sensitive Issues
- Smoking Guidelines for Adults Participating in Girl Scout Activities
- Smoking Guidelines for Girls Participating in Girl Scout Activities
- Use of Helium filled Latex or Mylar Balloons

Note: If you do not have a copy of *Position Papers* , request the publication from your Neighborhood Team Chair.

Event Forms Index

Application for District/Neighborhood Events----(sample)----------F-11------Page 16

Activity Scholarship Application/Guidelines----------Page 17-21

Activity Scholarship Notification for D/N Events----------Page 22

Worksheet for Budgeting for District/Neighborhood Events----------F-15--Page 23-24

Event Account Worksheet----------F-16-----Page 25

Registration Check-In Grid----------F-20----Page 26

District/Neighborhood Event Girl and Adult Participant Survey----------F-17------Page 27

District/Neighborhood Event Girl & Adult Participant Survey Recap--------F-17a----Page 28

District/Neighborhood Summary of Participation----------F-18------Page 29

District/Neighborhood Event Service Survey----------F-24-----Page 30

District/Neighborhood Event Service Survey Recap----------F-25------Page 31

girl scouts of eastern missouri

Community Development Manager
Phone Listing by District

District 1	314.592.2301
District 2	314.592.2302
District 3	314.592.2303
District 4	314.592.2304
District 5	314.592.2305
District 6	314.592.2306
District 7	314.592.2307
District 8	314.592.2308
District 9	314.592.2309
District 10	314.592.2310
District 11	573.760.9448
District 12 (Neighborhoods 1,5,6,7)	573.486.2899
District 12 (Neighborhoods 2,3,4,8,10)	314.592.2313
District 14	314.592.2314
District 15	660.956.0623
District 16	573.248.8755
District 17	217.242.1768
District 18	636.443.2242

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