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_____ (for non-camp use only) Overnight Event _____Yes _____No

Name of Event _____

Event Location _____

Event Director _____ [D] _____ [E]_____

Address_____ City/Zip_____

Email_____

Certified Camper (for events at camp) _____

D/N Leadership Team Chair Signature_____ Date_____

COMPLETE AN ACTIVITY SCHOLARSHIP EVENT NOTIFICATION FOR DISTRICT AND NEIGHBORHOOD EVENTS IF NEEDED

CEDARLEDGE			TUCKAHO			FIDDLECREEK		
Unit	Cost		Unit	Cost		Unit	Cost	
Ahwenasa	$45		Covered Wagons	$45		Happy Acres	$45	
Totem Village	45		Prairie Schooners	45		Pleasant Valley	45	
Cypress Meadows	60		Dogwood Dell	60		Hill & Dale	45	
Glen	60		Persimmon Patch	60		Glen & Vale	45	
Gypsy Dell	45		Raccoon Ridge	60		Ridgetop	45	
Daisy Dell	45		The Village	45		Hilltop	45	
Kiamecia	60		Sun Flower Meadow	45		Gaylord	75	
Skyview	60		Merry Oaks	60		Sequoia	75	
Tanda	60		Log Cabins	45		Dogpatch	35	
Timber Trails	60		Frontier Village	45		Day Outing	-0-	
Border Village	45		Tree Houses	45		Kitchen	75	
Cliffs End	45		Maple Grove	45				
Bright Star	65		Boones Loft	75				
Rocky Ledges	45		Carver House	75				
Boulder Ledges	45		Sacajawea	75				
Luckystone Lodge	65		Tuck East	75				
Manor House	65		Tuck West	75				
Petite Chalet	65		Hickory Lane	35				
Gail's Place	75		Mystery Pond	30				
Wohl Lodge	75		Green Ridges	-0-				
Prim Lake	35		Kitchen	75				
Whispering Winds	35							
Conestoga	35							
Day Outing	-0-							
New Dining Hall Kitchen	75							

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.

* The F-11 is due one year before the event date (ie: by April 30th for events the following April) for events involving camp.
*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

Girl Development Department Approval for Camping and Non Camping Events

Community Development Manager _____ Date _____

Assistant Director, Girl Development _____ Date _____

Routing: CDM: – White Event Director - Canary Neighborhood Manager/District Manager - 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: Camping Resource Specialist – White Community Development Manager will make and keep a copy. Above routing stays the same.