Girl Scouts of Southeastern Michigan

Program Event Registration Form

Please submit one form for each event for which you are registering. You may copy this form or download this form from our website at www.gssem.org.

____ New Registration ____ Add-On Registration

Event Name: _____

Event Date: _____ Event Time: _____Event Location: _____

____ Troop Registration Contact Name: (one name only) _____

____ Individual Registration Girl's Name: _____

Parent's Name: _____

Street Address: _____

City: _____State: _____ ZIP: _____

County: _____

Daytime Phone: ( ) _____ Evening Phone: ( ) _____

E-mail: _____

(By providing your e-mail address, your program confirmation packet will be sent electronically)

Troop #: _____ or _____ Juliette

Troop Level: _____ Daisy _____ Brownie _____ Junior _____ Cadette _____ Senior _____ Ambassador

____ Girl Scouts of Southeastern Michigan or ____ Out of Council: _____

FULL PAYMENT DUE AT TIME OF REGISTRATION

Girls: _____ x $_____ = $_____

Adults: _____ x $_____ = $_____

Total Amount Due: $_____

Amount Enclosed: (must complete this portion)

_____Cookie Dough $_____
_____Cashew Cash $_____
_____Check (payable to GSSEM) $_____
_____Cash (walk-in registration only) $_____
_____Credit Card (indicate total) $_____
Total Amount Enclosed: $_____

FOR CREDIT CARD PAYMENT, COMPLETE THE FOLLOWING:

Exp. Date ___ ___/___ ___

____ Visa ____ Master Card ____ Discover ____American Express

Card # __ __ __ __ - __ __ __ __ - __ __ __ __ - __ __ __ __ VIN # __ __ __ (3 numbers on back of card)

Name as it appears on card: _____

Signature: _____

Mail registration form to:
Girl Scouts of Southeastern Michigan
Detroit Service Center
500 Fisher Building
3011 W. Grand Blvd.
Detroit, MI 48202