



Girl Scouts of Southeastern Michigan

# Agreement to Assume Debt for Product Programs

The purpose of this form is to clearly spell out the financial and procedural requirements for the position of troop product program manager, specifically, the person responsible for fulfilling all requirements and obligations of the product sale program for their troop.

Troop # \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone (d) \_\_\_\_\_ Cell \_\_\_\_\_

Please check the GSSEM Product Program(s) the troop will be participating in during the 2024-2025 Membership year:

\_\_\_\_\_ 2024 Fall Product Program      \_\_\_\_\_ 2025 Cookie Program

Please select the service center your troop Fall/Cookie rewards should be sent to (please select one):

- Clinton Twp Service Center, 42800 Garfield Rd Clinton Twp, MI 48038
- Detroit Service Center, 1333 Brewery Park Blvd, Suite 500, Detroit, MI 48207
- Flint Service Center, Gateway Centre, 5400 Gateway Centre Dr, Suite B, Flint, MI 48507
- Port Huron Service Center, Birchwood Mall, 4350 24th Ave, Space 518, Fort Gratiot, MI 48059
- Southgate Service Center, 1 Heritage Place, Suite 140, Southgate, MI 48195
- White Lake Service Center, 8545 Highland Rd, White Lake, MI 48386

## Obligation for Debt:

I understand that I am taking responsibility for all product program monies owed to GSSEM.  
(Initial) \_\_\_\_\_

I understand that all funds must be accounted for. (Initial) \_\_\_\_\_

I understand that GSSEM may pursue collections and criminal charges against me if funds are not accounted for. (Initial) \_\_\_\_\_

I understand that all money collected from product sale programs belongs to the Girl Scout troop and to the Girl Scouts of Southeastern Michigan, and I may not personally use these funds for any reason. (Initial) \_\_\_\_\_

I understand that volunteers who misuse funds for which they are responsible will be released from all positions with GSSEM. (Initial) \_\_\_\_\_

## Responsibility for following product program procedures:

I understand that I must be a registered Girl Scout adult member with a background check to serve as the troop product program manager. (Initial) \_\_\_\_\_

I understand that I am responsible for monitoring the troop's online Fall Product Program and/or cookie accounts and promptly notifying GSSEM of any product transactions not authorized by the troop. (Initial) \_\_\_\_\_

I understand that I must deposit all money turned in to me by parents/guardians and from booth programs promptly into the troop's bank account. (Initial) \_\_\_\_\_

I understand that I must provide parents/guardians with a receipt anytime products are distributed or monies are collected. (Initial) \_\_\_\_\_

I understand that I must submit an Unpaid Parent/Guardian Account Form in the event that any parent/guardian does not pay for their product. Once the Unpaid Parent/Guardian Account form is submitted to GSSEM, I am not responsible for the parent/guardian's debt. (Initial) \_\_\_\_\_

I understand that volunteers who do not follow product program procedures will be released from all positions with GSSEM. (Initial) \_\_\_\_\_

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Signature - Troop Product Program Manager

Date

Thank you for taking on this responsibility, without you, there would be no product programs!