

**Girl Scouts of Eastern South Carolina**

**2024 Fall Product Program**

**Parent/Guardian Permission & Responsibility Form**

My Girl Scout, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a member of Troop \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

has my permission to participate in council sponsored 2024 Fall Product Program.

My signature below acknowledges that:

|  |
| --- |
| * I understand that my daughter must be registered as a Girl Scout from October 1, 2024, through September 30, 2025, membership year. * I understand that I am financially responsible for any orders submitted by me to the troop leader. * I understand that any product ordered or unsold cannot be returned to or exchanged at the council or by the leader. * I understand that my daughter cannot sell prior to the sale dates, and I understand that my daughter may be penalized for early orders and may not receive credit for orders received before specified sale dates. * I accept responsibility to meet all troop deadlines outlined by my daughter’s troop leader. * I understand that all products are promptly delivered to customers and monies owed by me are paid on a weekly basis to the troop leaders. Total monies will be paid in full no later than the established deadline. * I understand that if all money due by me is not paid by the due date, my daughter will not be entitled to receive recognitions. I understand that all monetary proceeds belong to the council and troop and are not to be retained by individual girls as their property. * I understand that due to the rising cost of recovering money from “Non-Sufficient Funds” checks, I will not accept personal checks over the amount of $75.00. * I understand that my daughter will only accept preprinted checks with the issuer’s address. It is required that girls record the telephone number and driver’s license number of the issuer on the face of the check. Council cautions against accepting out-of-state checks. * I understand that for my daughter to participate in the fall product program, I cannot have any outstanding debts with the council. * I agree to accept financial responsibility, including prompt payment for all products and money my daughter receives and will also see that she always has adult guidance. |

Girl Choices:

T-shirt size: \_\_\_\_\_\_\_\_\_\_\_\_ 100+ Large Plush OR Amethyst Cluster: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NEW higher-level choice, 175+ Monster Jam OR Disney on Ice (Date TBA in Charleston):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_

Phone/Cell: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_