



**Girl Scouts of Eastern South Carolina
Extra Insurance Request Form**

Registered Girl Scouts (Girls and Adults) are covered by accident activity insurance through Mutual of Omaha Insurance Co (Basic Coverage Plan 1). **For all trips longer than two (2) nights**, extra insurance must be obtained for trip or event approval. Each day of this trip must be covered, including travel days. Extra insurance is also required for events where non-members will be in attendance. This form with payment information and an itinerary (if applicable), must accompany your Trip Approval Form **three (3) weeks before the trip or event to give enough time to complete any missing training or paperwork**. Submit paperwork to the North Charleston Service Center, 7257 Cross County Rd., North Charleston, SC 29418. Fax 843.552.6221.

Service Unit [Click here to enter text.](#) Troop [Click here to enter text.](#)

Leader [Click here to enter text.](#) Phone (H) [Click here to enter text.](#) (W) [Click here to enter text.](#)

Address & Zip: [Click here to enter text.](#)

Type of activity: [Click here to enter text.](#)

Location: [Click here to enter text.](#) Dates From: [Click here to enter text.](#) To: [Click here to enter text.](#)

Total number of participants: [Click here to enter text.](#) (attach list to Trip Approval Form)

Level of coverage:	Plan 2	.11 per day per participant	accident
	Plan 3E	.29 per day per participant	accident and sickness, supplemental
	Plan 3P	.70 per day per participant	accident and sickness, primary
	Plan 3PI	1.17 per day per participant	accident and sickness, international trips

of participants [Click here to enter text.](#) X # of days [Click here to enter text.](#) X rate plan [Click here to enter text.](#) = \$ [Click here to enter text.](#) **(\$5 minimum) Rates subject to change.**

Payment information:

Cash: Check number

Credit Card (Please check one): Visa Discover MasterCard

Card Number [Click here to enter text.](#) CVV [Click here to enter text.](#)

Expiration Date: [Click here to enter text.](#) Signature [Click here to enter text.](#)

By typing my name in the box above I am offering my digital signature in lieu of my handwritten signature. I understand that my digital signature carries the same legal bindings as my handwritten signature.