

Girl Scout After Meeting Pick-Up Form

Membership Year _____

Girl Scout Name _____

The following people are allowed to pick-up this Girl Scout after meetings and outings:

Parent(s)/Guardian(s) Names:

Best Contact Phone Number _____

Primary contacts **after** Parent(s)/Guardian(s):

Primary Name _____

Phone Number _____

Relationship _____

Secondary Name _____

Phone Number _____

Relationship _____

For additional names, please list on the backside of this sheet.

Only the adults listed on this form will be allowed to pick up the Girl Scout listed on this form from meeting or activities.

Signature of Parent(s)/Guardian(s)

Date
