

Troop Trip Procedures

The following procedures will assist you in planning a trip overnight, or longer, to a site other than a Council facility, the troop's regular meeting place, or the home of an adult registered with the troop. These trips must be approved in writing by authorized Council personnel.

Where do we look for help?

See Council Policies and Standards: Transportation and Overnight Trips sections.

Safety Activity Checkpoints offer valuable information regarding planning troop trips. See the Trip/Travel, Camping: *Safety Activity Checkpoints*. Read the checkpoint and check your girls on the steps for readiness.

The following steps will assist you in securing council approval for the trip:

- The attached Troop Trip Approval Application should be submitted to the Community Development Specialist at your area office *at least three months before the anticipated trip*. The Community Development Specialist will approve/disapprove the application within 14 business days by phone or e-mail.
- The Trip Itinerary and Trip Participant Roster should be submitted to the Community Development Specialist *at least ten business days before the beginning of the trip*.
- To ensure custodial parent or legal guardian permission, the leader will have a completed Trip Information/Permission form for each girl during the trip.
- For a trip lasting more than two nights, a troop must purchase, through the Council, accident or accident/illness insurance by submitting the Insurance Plan Enrollment Request and a check made out to Girl Scouts of Texas Oklahoma Plains, Inc. to the Membership Manager *ten business days before the beginning of the trip*. *Note: There is a separate minimum premium of \$5 if purchasing optional insurance.*
- If the trip includes participation in a high risk activity, please complete section B of the Troop Trip Application. For questions about high risk activities, contact your Area Outdoor Education Manager.
- If your troop wishes to participate in a money-earning project to assist in financing the trip, complete the Money Earning Project Application section for approval. Ask your Area Outdoor Education Manager for an additional forms you may need.
- If it is necessary to lease a vehicle(s) for the trip, utilize the If You Lease a Vehicle information.

Troop Trip Application

Troop# _____ Service Unit _____ Grade Level: _____
 Leader Name _____ Day/Phone _____ Evening/Phone _____
 Address _____ City _____ Zip _____
 Email address _____

A. Proposed Trip Information

Number of girls taking trip _____ Age of girls at time of trip _____ Number of adults taking trip _____
 Destination/Purpose of Trip _____
 Expected Accommodations (camp, hotel, private home, etc.) _____
 # of days _____ Dates of trip (month/days/year) _____
 Proposed activities _____
 First Aider(s) _____ Certifying Organization _____ Expiration _____
(MUST attach copy of certification(s))

Will troop be camping? Yes No Describe campsite accommodations _____

Name of trained adult and appropriate Outdoor Skills training level completed _____

Will the girls be swimming? Yes No Describe site _____

Lifeguard(s) _____ Certificate held _____ Expiration _____

Will girls be participating in boating, rafting or other water activities requiring certified instructors? Yes No

Explain _____

Certified instructor(s) _____ Certificate held _____ Expiration _____

Will outside consultants or resources be involved? Yes No Explain _____

Will you have to sign "hold harmless" agreements? Yes No (Please attach a copy.)

B. High Risk Activity Request (Complete this section if troop wishes to participate in a high-risk activity as part of a troop trip)

Which activities are considered "high risk"?

- The activity involves a reasonable expectation of physical risk to the girls.
- The activity involves legal risk to the adult volunteers and/or the council. These include situations where rider or other additional insurance may be required, vendor or facility contracts may need to be signed, adults must be certified in a specific skill, or other specific critical guidelines must be followed to ensure the safety of the girls.

Site _____ Activity _____

Address of site _____ City _____ State _____ Zip _____

Site Owner/Manager _____ Day Phone _____

Expert Instructor(s) _____ Certificate held _____ Expiration _____

Experience _____

Expert Instructor(s) _____ Certificate held _____ Expiration _____

Experience _____

Will site provide certificate of insurance? Yes No On file at your Council Office.

Attach any contract, waiver or release of liability required by site for approval by Girl Scouts of Texas Oklahoma Plains, Inc.

Special skills needed by participants _____

Describe prior experience of participants for this activity _____

Describe preparations that troop will make for this experience _____

Safety equipment required for activity: _____ Supplied by: _____ Inspected by: _____

Troop Trip Application *(continued)*

Proposed Trip Budget *(Details of budget will be submitted in Trip Itinerary)*

Anticipated total cost of trip \$ _____ Amount currently in troop treasury \$ _____

Amount needed in troop treasury to make trip possible \$ _____

If necessary, how will additional money be earned? _____

Other resources? _____

C. Proposed Troop Money-Earning Projects *(Complete this section only if a money-earning project(s) will be required to finance the trip. Check with your Area Outdoor Education Specialist for additional forms for other money-earning projects.*

Council Policy: Troops must participate in the Council cookie sale each year BEFORE asking for approval for additional money-earning projects, except in the case of a new troop registering after the cookie sale has ended.

1. Proposed Money-earning project _____ Date _____

Site _____ # of girls expected to participate _____

Estimated income \$ _____ Estimated expenses \$ _____ Estimated profit \$ _____

2. Proposed money-earning project _____ Date _____

Site _____ # of girls expected to participate _____

Estimated income \$ _____ Estimated expenses \$ _____ Estimated profit \$ _____

Additional comments _____

Reports for completed money-earning projects must be filed within one month after completion of project.

E. Agreement: We understand that this is a request for trip approval. We will not make trip arrangements, deposits or payments until we have received Council approval for this trip. We will complete all necessary forms and return them to the area office at the appropriate time. We agree to follow Girl Scouts of Texas Oklahoma Plains, Inc. and Girl Scouts of the USA policies and standards and to use the trip planning guidelines listed in the *Safety Activity Checkpoints*. If during the planning process, significant changes occur in the information on this application, we will notify our Community Development Specialist.

Signature of Girl: Trip Chair, President or Secretary _____ Date _____

Signature of Leader/Advisor/Trip Coordinator _____ Date _____

Submit form *at least three months* before proposed trip to your area office:

Community Development Specialist
Girl Scouts of Texas Oklahoma Plains, Inc.
Abilene Area Office
278 South Pioneer, Suite 107
Abilene, TX 79605

Community Development Specialist
Girl Scouts of Texas Oklahoma Plains, Inc.
Amarillo Area Office
6011 SW 45th Avenue
Amarillo, TX 79108

Community Development Specialist
Girl Scouts of Texas Oklahoma Plains, Inc.
Fort Worth Area Office
4901 Briarhaven Rd.
Fort Worth, TX 76109

Community Development Specialist
Girl Scouts of Texas Oklahoma Plains, Inc.
Lubbock Area Office
2567 74th Street
Lubbock, TX 79423

Community Development Specialist
Girl Scouts of Texas Oklahoma Plains, Inc.
Wichita Falls Area Office
2106 Kemp Boulevard
Wichita Falls, TX 76309

Community Development Specialist
Girl Scouts of Texas Oklahoma Plains, Inc.
Southlake Service Center
584 N Kimball Avenue, Suite 100
Southlake, TX 76092

Troop Trip Itinerary

Provide a copy for each girl, her parents, the emergency contact person and send one to the Community Development Specialist at least ten business days before trip.

Troop# _____ Service Unit _____ Grade Level: _____

Leader/Advisor Name _____ Day/Phone _____ Evening/Phone _____

E-mail address _____

Number of Trip Participants: _____ Girl Scouts _____ Girl Scout Adults

Trip At Home Contact:

Name _____ Day/Phone _____ Evening/Phone _____

Address _____ City _____ Zip _____

Trip Information:

Destination(s) _____

Departure date _____ Time _____ From _____

Return date _____ Time _____ To _____

Public Transportation (air/train/bus, etc.):

Date _____ From _____ Time _____ Flight # _____ Carrier _____

Date _____ From _____ Time _____ Flight # _____ Carrier _____

Private Transportation (Provide information on all drivers):

Per Volunteer Essentials, Each driver must be an approved Adult Volunteer, be at least 21 years old, have a good driving records, a valid driver's license and a registered/insured vehicle.

Make/Model/Year	License Plate # or Rental Agency/Address/Phone	Driver's Name	Driver's License State/Number	Insurance Co. and Policy #

Schedule (Include all planned activities and accommodations)

Date	Location	Activities	Lifeguard or Expert	Overnight Accommodations Address/City/Phone

We have shared all trip information with parents and our “at home” contact. We will follow *Safety Activity Checkpoints* and Girl Scouts of Texas Oklahoma Plains, Inc. policies and standards on this trip. We will keep our “at home” contact informed of any changes in our trip plans. We will do our best to make the trip not only fun but also a learning experience for girls.

Troop Leader Signature _____ Date _____

Other Traveling Adult Signature _____ Date _____

Submit this form at least ten business days before trip to area office Community Development Specialist.

All accompanying adults are registered Girl Scouts and have successfully completed a criminal background check.

Trip Information

Troop # _____ is planning a trip to _____

Activities will include _____

Date/Time/Place of Departure _____

Date/Time/Place of Return _____

Method of Transportation _____

Parents will receive a complete itinerary about two weeks before the trip.

Cost per girl \$ _____ Troop will pay \$ _____ which will be earned by money-earning projects

Each girl should plan to bring \$ _____ spending money.

(See Trip Participant Agreement on back of Trip Permission for additional information re: trip finances.)

Adults accompanying girls:

Name _____ Phone _____

Name _____ Phone _____

If the trip is more than three nights, a report signed by a physician is required of physical examination within 24 months of the trip.

Troop contact person while troop is on the trip: Name _____ Phone _____

In case of delay in returning, or an emergency, Leader will notify (name) _____

(phone) _____ who will then notify parents.

Leader's Signature _____ Date _____ Phone _____

PARENT: CUT ALONG DOTTED LINE AND RETURN TO LEADER BY (DATE) _____

Trip Permission

I give my permission for my daughter, _____ to attend and participate in all activities related to _____ on _____.

I understand some risk is inherent in a natural setting and in activities such as archery, horseback riding, swimming, canoeing and sailing. I also understand safety equipment will be provided (i.e. riding helmets and personal flotation devices) and agree my child will be responsible for wearing protective equipment and following safety rules as instructed. I understand that there may be minimum skill requirements for some activities, and if my daughter does not meet them, she will not be allowed to participate in that activity. I will not allow her to attend the trip if she becomes exposed to any contagious disease or if for any reason I do not consider her in good physical condition. NOTE: Prescriptions and/or over the counter medications will be administered to a girl by or in the presence of the responsible adult and only with written permission from a custodial parent, legal guardian or a physician. Prescriptions and/or over the counter medications should be in the original container, carefully labeled with the girl's name and dosage, and must be accompanied by written instruction from a custodial parent, legal guardian or physician. In case of accident or illness, I authorize a representative of Girl Scouts of Texas Oklahoma Plains, Inc. to give consent to a physician and/or hospital for medical and/or surgical treatment. It is understood that every effort will be made to notify me before such action is taken. I understand that Girl Scouts of Texas Oklahoma Plains, Inc. may use photographs or audio/video tapes of my daughter in event activities for Girl Scout public relations. I understand the Council cannot be responsible for loss of valuables.

During the activity, I may be reached at _____

Phone _____ Address _____ City _____

Contact person to notify in an emergency if custodial parent/legal guardian cannot be reached. This person is authorized to act for me/us:

Name _____ Phone _____ Address _____ City _____

Who will be picking up your daughter?

Custodial Parent/Legal Guardian Name _____ Driver's License # _____

Other Relative Name _____ Driver's License # _____

Friend of Family Name _____ Driver's License # _____

Custodial Parent/Legal Guardian Signature _____ Date _____

Trip Participant Agreement

PARTICIPANT

I understand that my attitude and behavior are critical to the success of the trip. Therefore, for the good of the trip as well as my fellow troop members, I agree to abide by the following:

1. I will be sensitive to the needs of each troop member.
2. I will respect the places and the people with whom I come in contact.
3. I agree to follow all rules and directions as set by the troop leaders/advisors.
4. I will be responsible for my personal belongings and equipment and will not hold Troop _____ responsible for their loss or damage due to my negligence or neglect.
5. I will treat all equipment provided for my use with care. I understand that I will be assessed for damages to any equipment in the event that my use of that equipment is negligent or abusive.
6. I agree to take my share of daily responsibilities such as setting up housekeeping and clean-up.
7. I will use required safety equipment and follow all safety rules and procedures.

Participant Signature

Date

PARENT/LEGAL GUARDIAN

1. I understand and agree with the above responsibilities for my daughter.
2. I understand that my daughter may be sent home in case of any serious misconduct. Transportation would be at my expense and the troop adults would make the travel arrangements and notify me of those plans.
3. I understand that money earned by the troop belongs to Girl Scouts, not the individual girls.
4. I agree to pay my daughter's share of trip costs of \$_____ by _____, if applicable.
5. If my daughter should have to withdraw from this trip, the amount paid by me would be refundable unless already spent or obligated, i.e., reservations, etc.

Custodial Parent/Legal Guardian Signature

Date

Emergency Plan for Girl Scout Troops

"Be prepared," the Girl Scout motto, is the key to handling emergencies if they arise. Whenever an outing with your troop is planned, be sure to take with you:

- ✓ Signed parent permission forms which include where parents can be reached in case of emergency
- ✓ Phone number for troop's emergency contact
- ✓ Council emergency telephone number
- ✓ Directions to the nearest hospital or medical facility
- ✓ Girl Scout insurance forms and Accident/Incident Forms
- ✓ This *Emergency Plan for Girl Scout Troops*

Remember to check *Safety Activity Checkpoints* for suggestions concerning the specific activity planned.

EMERGENCY TELEPHONE NUMBERS

Police _____ Fire _____

Ambulance _____ Hospital _____

Or where appropriate, call 911.

Procedures to follow in the event of a very serious accident, emergency, or fatality:

The person in charge at the scene needs to:

- * Give priority attention to providing all possible care for the injured. Do not move the victim unless it is necessary for safety reasons.
- * Secure ambulance, doctor, police, and others as appropriate.
- * While help is being summoned, take care of injuries requiring immediate first aid.
- * Notify troop's emergency contact who will notify all parents.
- * In the event of a fatality, always notify police. Retain a responsible adult at the scene of the accident or emergency. See that no disturbance of victim or surroundings is permitted until police have assumed authority.
- * Call the Council's emergency phone number to report occurrence and to secure additional assistance.

Girl Scouts of Texas Oklahoma Plains Emergency Cell Phone:
682-551-0281

DO NOT MAKE ANY STATEMENTS to media representatives. Assure them that they will get current information by calling the Council.

Do not sign any statements or accident reports except for:

1. Police officer
2. Personal insurance company or attorney
3. Girl Scout insurance company or attorney

For minor emergencies, please call your Service Unit Manager.

If You Lease a Vehicle

Are you planning a trip? Do you intend to lease a vehicle?

When leasing a vehicle for a trip, the following Council Policies must be followed:

1. The number of passengers must not exceed the intended passenger limits of the vehicle. Passengers must have and use their own individual seat belt. Applicable state statutes regarding child safety seats must be followed.
2. **Use of 15-passenger vans to transport girls is not permitted.**
3. Drivers must put safety first whenever driving. While driving, drivers should not make/receive cell phone calls unless using a hands-free device. Drivers are prohibited from using other cell phone features including text messaging, browsing the Internet, reading or sending emails, and playing games.

Please refer to *Volunteer Essentials* for information regarding leasing a vehicle.

Insurance coverage

There are two kinds of insurance coverage that apply to leased vehicles: liability and physical damage coverage.

- Liability Coverage - This insurance protects a driver in case of accident resulting in a lawsuit.

The minimum requirement for liability coverage on a leased automobile or van is \$1 million.

You have two sources for securing this liability insurance coverage:

1. The driver's personal liability insurance coverage
2. The leasing agency's liability insurance coverage

- Physical Damage Coverage - This insurance coverage is to pay for any physical damage to the leased vehicle.

You have two sources for this coverage:

1. Each driver should check his/her own insurance to see what physical damage coverage may be included for leased vehicles.

2. You have the option to purchase "CDW", collision damage waiver, from the leasing company. This may run \$9.00-\$18.00 a day and have a deductible as high as \$2500.00. **Read the fine print on the back of the leasing contract to see what is covered and what is not.**

Before your trip

- Purchase necessary insurance coverage from the leasing company.
- Lease the vehicle in the name of the primary driver. Make sure that all drivers are listed on the lease agreement. Provide the Council with necessary identifying information on the leased vehicle by completing and mailing the attached Vehicle Leasing Report along with a copy of the lease contract after you return from the trip

Vehicle Leasing Report

Troop Leader		Troop #
Primary Driver		Phone #
Driver's License #		State
Mailing Address		
Leasing Company		Phone #
Address		
Lease Contract #		Dates from to
Vehicle Year, Make & Model	Vehicle Identification #	# Seat Belts
Depart from	Destination	

Signature _____ Date _____

Vehicle Leasing Report

Troop Leader		Troop #
Primary Driver		Phone #
Driver's License #		State
Mailing Address		
Leasing Company		Phone #
Address		
Lease Contract #		Dates from to
Vehicle Year, Make & Model	Vehicle Identification #	# Seat Belts
Depart from	Destination	

Signature _____ Date _____

Troop Participation Roster

Please PRINT clearly. All adults and girls must registered Girl Scout members.

Name	Trip Responsibility	Parent/Contact Person back home (in case of emergency)	Relationship	Phone for contact during trip
<i>Sample: Jane Doe</i>	<i>First-Aider</i>	<i>John Doe</i>	<i>Spouse</i>	<i>817-555-5555</i>
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20.				



Mutual of Omaha Insurance Information for Troop Trips

The Basic Plan of Girl Scout Activity Accident Insurance covers accidents occurring during approved Girl Scout activities lasting no more than two nights (three nights if one of the nights is an official federal holiday) and it does not cover sickness.

PURCHASE OF OPTIONAL INSURANCE IS NECESSARY:

- For any trip lasting more than two nights (three nights, if one of the nights is an official federal holiday, accident and illness insurance coverage **MUST** be purchased).

PLAN 3E – OPTIONAL ACCIDENT INSURANCE AND SICKNESS INSURANCE:

- Designed to provide financial assistance for approved, supervised activities excluded in the Basic Plan.
- Covers sickness (for trips lasting more than two nights) and accidents.
- Includes approved, registered Girl Scouts (does not include tag-alongs and/or non-registered adults).
- Covers travel directly to and from activity.
- Costs \$.29 per day for each participant (girl and adult).
- Coordinates with primary family insurance coverage.
- Plan must be purchased for the entire period of the activity (counting day one and including the last day, even if they are not full days).

PLAN 3P – OPTIONAL ACCIDENT INSURANCE AND SICKNESS INSURANCE:

- Same cover as Plan 3E.
- Is the primary coverage plan and does not rely on the participant’s own family insurance for major compensable benefits. Cost is \$.70 per day for each participant (girl and adult).

HOW TO PURCHASE AN OPTIONAL INSURANCE PLAN:

- Fill out the Insurance Plan Enrollment Request Form below.
- Enclose check made out to *Girl Scouts of Texas Oklahoma Plains, Inc.* in the correct amount (A minimum payment of \$5.00 is required).
- Submit request and check to the Membership Manager at the area office *at least ten business days prior to the event*.
- Use your standard Troop Insurance Packet for filing claims.



INSURANCE PLAN
Enrollment Request

Please provide Optional Plan Insurance to cover all enrolled participants in the following approved, supervised Girl Scout activity.

Coverage	Troop	Trip Destination	Beginning Date	Ending Date	(1)	(2)	(3)	(4)	(5)
					Number of Participants	Number of Days in Activity	Number Participant Days	Premium per day/ Participant	Total Premium (3x4)
PLAN 3E								.29	
PLAN 3P								.70	

Enclose check payable to *Girl Scouts of Texas Oklahoma Plains, Inc.* for the Total Premium shown above. Minimum premium is \$5.00. Premium must be paid for full or partial days on trip.

Example: A troop leaving at 6:00 PM on June 3 and returning at noon on June 7 would have 5 “Days on Trip”.

Submit this form with check to the Membership Manager at the area office *at least ten business days before the trip*.

Troop Signature _____ Position _____ Date _____