



For information on joining Girl Scouts, please attend the Parent Meeting:

Date: Monday, September 25, 2017

Time: 5:00pm

Location: School's Cafeteria

If you can't attend the meeting please return it to:
School's front office

Questions? Please contact: Fabiola Pimentel (770) 549-0933 or fpimentel@gsgatl.org

Discover the power of G.LR.L. (Go-getter, Innovator, Risktaker, Leader)™. Learn more, and sign your girl up today.

Girl Scout Registration Form

Girl's name:	Paren	t/Guardian nam	e:
School Name:		Grade:	Date of Birth:
Home Address:			
City:		Zip:	County:
Phone #:	n e na ideal de la	Email:	
Registrant's racial background: (check as many as a	pply)		
□ American Indian/Alaskan Native	□ □ White	□□ Black/African-American	
□ □ Asian	□ ☐ Hawaiian or Pacific Islan	Islander 🗆 Other (specify)	
Registrant's ethnic background: (please check one	☐ Hispanic or Latina ☐	☐ Not Hispanic or Latina	
mental Girl Scout activity insurance.			our membership to the local and national organization and supple
Does your daughter have: AmerigroupPea membership dues and provide a shopping voucher. Peach State members, please contact Peach State a	Pease print your daughter's mer	nber identification nu	ımber
Need Financial Assistance? Financial barriers shoul part of the fee. Please assist me in the amount of \$	Paren	t/Guardian Initials:	
Parent Permission: The registrant has permission to join Gi imaging.	rl Scouts. We understand that when	participating in Girl Sco	ut activities the registrant may be photographed for print, video, or electronic
Parent/Guardian Signature:		Dat	te:
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