girl scouts of southwest indiana

Cookie Program Permission & Responsibility Agreement

A signed copy of this form must be on file in the GSSI corporate office by DECEMBER 1 in order for a girl to participate in the annual Girl Scout Cookie Program. Forms may be turned in to your troop/group volunteer or submitted to GSSI at cookies@girlscouts-gssi.org or mailed to 5000 E. Virginia Street, Ste. 2, Evansville, IN 47715.

Girl's Name_____ Address_____

School_____ Grade_____ Age_____ Date of Birth_____/_____/_____

Parent/Guardian's Name (printed)_____ Mobile _____

Parent Email_____ Parent Address_____
(If different from Girl's Address)

Parent 1 Employer_____ Parent 2 Employer_____

Service Unit_____ Troop/Group #_____

Troop Leader(s) Name(s)_____

My Girl Scout (girl's name)_____ has my permission to participate in the (provide program year)_____ Girl Scout Cookie Program, conducted by Girl Scouts of Southwest Indiana, Inc.

To ensure that the Girl Scout Cookie Program delivers maximum benefit to your Girl Scout and the thousands of other Girl Scouts who depend on caring adults to be good role models, GSSI assumes that parents/guardians will, in good faith, agree to:

1. Accept financial responsibility for all cookies your Girl Scout receives and understand that Girl Scout Cookies may not be returned.
2. Turn in the money owed—in full and on time—to the appropriate person (e.g., her adult troop/group volunteer or the GSSI office.)
3. Understand that the monies collected by a Girl Scout belong to her Girl Scout troop and to Girl Scouts of Southwest Indiana, Inc.

In the event that these funds are not paid on time, I understand that Girl Scouts of Southwest Indiana, Inc. reserves the right to initiate collection procedures. If a collection procedure is initiated, I understand that I will be responsible for all collection fees, attorney fees, and court costs. For the sake of my Girl Scout, I will ensure that she follows the rules set for the Girl Scout Cookie Program by Girl Scouts of Southwest Indiana, Inc., including observing safety guidelines, not selling prior to the start date, and that she has accountable adult guidance throughout the sale experience. Signature REQUIRED below.

SIGNATURE OF PARENT/GUARDIAN REQUIRED_____ DATE____/____/____
(Embedded Text and DocuSign not accepted.)

Troop Leader is REQUIRED to RETURN THIS SIGNED & COMPLETED document to the Council Office.

Signed scanned documents can be emailed to: cookies@girlscouts-gssi.org by DECEMBER 1

GSSI will provide copies of the completed form at the Troop Leader's request.