

unpaid registrations will not be processed.

## **Program Registration Form**

Registration Li I roop Li Individual	Troop #:Grades:	# Girls:# Adults:
Participant Leader/Advisor:		
Mailing Address:		City/State/Zip:
Telephone (day):	(cell):	:
Email Address:	individual must have an adult attending th	ne program.
Name of adult attending:		
Program Name:	County:	
Program Date/s:		Program time:
# Participants x Fee \$	= \$	
Cash \$ Check \$ _	Cookie Credits \$	Money order \$
Charge amount \$		☐ Master Card ☐ Visa
Account #:	Exp. Date:	3 digit code (back of card)
Account Name:	Signature:	
☐ Registered Girl Scout for current year 2011-2012 ☐ I would like to register as a Girl Scout to attend the program  G/A Name Allergy/Special Needs Emergency Contact Telephone		
Girl Scouts Heart of the Hudson, I Attn: Registrar 2 Great Oak Lane Pleasantville, NY 10570  If paying by credit card, you may fax th one registration form per person. Prog checks payable to GSHH. Returned ch	nc. is registration. If registration for a progran ram registrations close when they reach clecks will incur a \$25.00 service fee.	ach program event. Please send registration to:  n is being accepted on an individual basis; please send capacity or two weeks prior to the program. Make on, Inc., you will receive a full refund. This decision is
generally made about two weeks prior to the event. Otherwise, there are no refunds for programs and deposits are non-refundable. All registrations are accepted on a <u>first-come, first-served basis from paid registrations</u> and all fees are non-refundable. Incomplete or		