



Troop Travel Application

Check travel guidelines and procedures prior to planning troop travel or submitting a Troop Travel Application. This form should be in advance of your departure date and submitted to GSMH via info@girlscoutsmoheartland.org for approval. You will receive an email when your trip is approved.

Complete this form 4 weeks in advance to obtain GSMH approval if any of the following apply:

1. Day trip is greater than 50 miles.
2. Event is a simple overnight trip.
3. Trip is greater than 100 miles out of GSMH boundaries.
4. Travel participants will be away from home 3 or more overnights.

Complete this form 12 weeks in advance to obtain GSMH approval if the trip is international.

Troop Information

Troop Number _____ Service Unit Number _____ County _____

Grade Level Daisy Brownie Junior Cadette Senior Ambassador

Troop Leader's Name _____ Email _____

Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____

Trip Details

Trip Destination(s) _____

Departure Date _____ Return Date _____

Lodging Telephone _____ Address _____

Transportation: Private Vehicle Leased Vehicle Van Train Ship
 Plane Chartered Bus Other _____

Driver's Name _____ Insurance Name & Expiration _____

Driver's Name _____ Insurance Name & Expiration _____

Names of Girls Traveling

Names of Adults Traveling

CPR/First Aid Certification

Troop/group must have person(s) with current certification in First Aid and CPR for all travel.

Certified Person _____ Phone _____

Address _____ City _____ State _____ Zip _____

Date of First Aid Certification _____ Date of CPR Certification _____

Required for All Trips: Emergency Contact Person at Home

Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

Camping Information

This section must be completed when your trip includes camping.

Name of Campground _____ Number of Nights _____

Is campsite a Girl Scouts of the Missouri Heartland program center or property? Yes No

Name of Person Trained in OL2 _____ Date Trained _____

Name of Person Trained in OL3 _____ Date Trained _____

Leader Acknowledgement

I have completed the appropriate outdoor level trainings required for this trip (check all that apply).

- Indoor Overnights & Day Trips Training
- Outdoor Level 2
- Outdoor Level 3
- Wilderness First Aid

I have read the travel guidelines and procedures and will follow GSUSA and GSMH policies. I have attached the following for trips requiring GSMH approval (check all that apply).

- Trip Itinerary
- Driver's License for each driver
- Current vehicle insurance coverage for each vehicle
- Accident and Sickness Coverage (trips lasting 3+ nights)
- Passport for each traveler (international trips only)

Leader Signature _____ Date _____

For GSMH use only.

New Leader or Troop Support Specialist (day trips and simple overnights)

- I have reviewed this request and approve this activity.
- I have reviewed this request and do not approve this activity for the following reasons:

New Leader/Troop Support Signature _____ Date _____

Director of Customer Service (trips greater than 100 miles, lasting 3 or more overnights, and/or international)

- I have reviewed this request and approve this activity.
- I have reviewed this request and do not approve this activity for the following reasons:

Director of Customer Service Signature _____ Date _____

Girl Scouts of the Missouri Heartland, Inc.

877-312-4764 ● www.girlscoutsmoheartland.org ● info@girlscoutsmoheartland.org

