



Membership Dues Summary

Mem. Year through 9/30/_____

DS no./recpt no _____

Batch _____

Batch Date _____

Please complete this form and attach completed member registration forms and payment for the total amount of dues. Please be sure to note additional payments or contributions in the space provided below and return to your local council representative.

Grp/Trp No.	SU/Team Area	Registration Area	Council Code	Check One
_____	_____	_____	_____	<input type="radio"/> New Group <input type="radio"/> Re-Registering Group

INVOLVE Check the one Term that best describes the primary way in which these girls participate:

Troop/Group *(Same group of girls participating together, long-term)*

Individual *(Girls will be participating in one or multiple ways, not as part of a long-term group)*

DURATION Program Duration: *(check one)*

8-12 Months 4-7 Months 1-3 Months 1-4 Weeks 6 Days or less

PROGRAM Program Frequency: *(check one)*

Daily Weekly Every other week Monthly 1-3 times annually

GRADE LEVEL Please check one grade level that represents the majority of the girls that are registered now:

Grade K-1 (Daisy) Grades 2-3 (Brownie) Grades 4-5 (Junior)
 Grades 6-8 (Cadette) Grades 9-10 (Senior) Grades 11-12 (Ambassador)

PLACE Type of Meeting Place: *(check one)*

Public Facility Home School Religious Building
 Other Organization Facility Council Facility Other _____

LOCATION Meeting day, time, and location: *(fill in all)*

Day _____ Start Time _____ End Time _____

Name of meeting place _____

Address _____

ANNUAL REGISTRATION	LIFETIME REGISTRATION
Annual Registrations: Number of Girls _____ (\$12 each) Number of Adults _____ (\$12 each) Total Number _____ Total amount of dues \$ _____ Donations received \$ _____ Other monies \$ _____ Total amount attached \$ _____	Lifetime Registration: Number of Graduating Seniors* _____ (\$156 each) Number of Lifetime Adults _____ (\$300 each) Total Number _____ Total amount of Lifetime dues \$ _____ Donations received \$ _____ Other monies \$ _____ Total amount attached \$ _____ <small>*Must be a currently registered Girl Scout who will be graduating high school (or equivalent). Registration and payment must be submitted by September 1st.</small>

PAYMENT MEMBERSHIP IN GIRL SCOUTS OF THE USA(GSUSA): *(not refundable or transferable)*

# _____ \$ _____ Cash	# _____ \$ _____ Amex
# _____ \$ _____ Check(s)	# _____ \$ _____ Discover
# _____ \$ _____ Visa	# _____ \$ _____ Other <i>(specify)</i> _____
# _____ \$ _____ MasterCard	

COMPLETED BY Form completed by: *(check one)*

Volunteer Council Staff
 Name _____
 PhoneNumber _____ Email _____