

Girl Shirt Size _____

Girl Hoodie Size _____



**Girl Scouts of the Desert Southwest – Southern New Mexico & West Texas
2018 FALL PRODUCT PROGRAM PERMISSION FORM
PARENT/GUARDIAN PERMISSION & RESPONSIBILITY FORM**

My Girl Scout, _____, a member of Troop _____, has my permission to participate in council-sponsored 2018 Fall Product Program.

My signature below acknowledges that:

- I understand that my daughter must be registered as a Girl Scout for the October 1, 2018 through September 30, 2019 membership year. If not, I understand that the council or my daughter's troop may hold onto recognitions until my daughter is registered.
- I understand that I am financially responsible for any orders submitted by me to the troop leader.
- I understand that any product ordered or unsold cannot be returned to or exchanged at the council or by the leader.
- I understand that my daughter cannot sell prior to the sale dates, and I understand that my daughter may be penalized for early orders and may not receive credit for orders received before specified sale dates.
- I accept responsibility to meet all troop deadlines outlined by my daughter's troop leader.
- I understand that all products are promptly delivered to customers and monies owed by me are paid on a weekly basis to the troop leaders. Total monies will be paid in full no later than the established deadline.
- I understand that if all money due by me is not paid by the due date, my daughter will not be entitled to receive recognitions.
- I understand that outstanding accounts will be turned over to a collection agency by the council at the conclusion of the sale and any collection cost will be added to the amount owed.**
- I understand that all monetary proceeds belong to the council and troop and are not to be retained by individual girls as their property.**
- I understand that due to the rising cost of recovering money from "Non-Sufficient Funds" checks, I will not accept personal checks over the amount of \$75.00.**
- I understand that my daughter will only accept preprinted checks with the issuer's address. It is required that girls record the telephone number and driver's license number of the issuer on the face of the check. Council cautions against accepting out-of-state checks.**
- I understand that in order for my daughter to participate in the fall product program, I cannot have any outstanding debts with the council.**
- I agree to accept financial responsibility, including prompt payment for all products and money my daughter receives and will also see that she has adult guidance at all times.**

Parent/Guardian Name (print): _____

Mailing Address: _____
Street City State Zip

Phone: (____) _____ (____) _____ (____) _____
Home Work Cell

E-mail Address: _____

Parent/Guardian Signature: _____

Are you or Spouse Active Military: No Yes, if checked please complete the following

Sponsor Name: _____ Unit: _____

Address: _____ Duty Phone #: _____

If money is delinquent commander will be contacted