

agreement for their records.

2024 Cookie Program Extension

Date: _		Troop Coordinator Na	me:	
Troop/	IRG Number:	Girl Scout Name:		
Parent	Name:	Pho	ne Number:	
Parent	Email Address:			
_	I understand and agree wit	h each of the following statem	nents - INITIAL EACH LINE.	
	I confirm that my Girl Scout Program.	t is up to date on all payments	to troop and in good standing for the 2024 Cookie	
_		ncially responsible for any ordenedia during the 2024 Cookie F	ers submitted by me to the troop via email, text, Program and Extension.	
_	I understand that all cookie attend any trips or classes s		signed to my Girl Scout by Sunday, March 3, 2024, to	
_	I understand if my Girl Scou items have already been pu		March 3, 2024, they forfeit the reward as travel and	
_	I understand that unsold co troop.	okies can not be returned to o	or exchanged at the council, cookie cupboards, or the	
	I understand if a delinquen classes until my balance is p		I Scout will not be authorized to attend any trips or	
	 If the trip has passed b 	efore the balance is paid in fu	ll, my Girl Scout will forfeit that reward.	
_	-	s, Carmel deLites, Peanut Butte	Adventurefuls, Toast-Yay!, Lemonades, Trefoils, Thin er Sandwiches, Carmel Chocolate Chip, and donated	
_		understand Girl Scouts may booth at approved booth locations with a booth agreement on file with GSDSW roduct Team during the extension.		
	understand I can host a cookie break or lemonade stand during the time.			
_	I understand my total balan stated by your troop cookie	•	later than Sunday, March 24, 2024, unless otherwise	
Parent	Signature:		Date:	
Troop (Cookie Coordinator Signatur	e:	Date:	
Once th	nis agreement has been signe	ed by all parties, please send it	t to info@gsdsw.org for documentation purposes.	
We end	ourage the Troop Cookie Coo	ordinator to hold onto the origi	inal and the parents to take a photo of the signed	