



Troop #	SU #	Program Level	Date	
			_Approximate round-trip miles:	
Proposed Dates			Proposed # of Nights:	
Proposed Lodging			Proposed Transportation:	
List Proposed Mon	ney-Earning Proje	cts:		
Proposed Cost Per	Person \$			
Number of Girls _	Age range	at the time of trip	Number of Adults	
5. Is there a write The following ste □ Read □ Read	tirls are preparing to evious travel experient are the girls & ten agreement sign the sections on Platthe Troop Travel I	rience? leaders meeting with parent led by all parties? lewed and completed: (ple lanning Trips in Safety-Wise Process (flow chart).	page 44-60.	
		fscc.org/volunteers/leaders_	<u>travel_troop.html</u>	
Travel Troop Ad	ult Information (list additional adults on separ	rate page):	
Name:	Completion Date of Travel Troop Traini		etion Date of Travel Troop Training:	
Address		City	Zip Code	
Phone	Email A	.ddress		
Name:		Comple	Completion Date of Travel Troop Training:	
Address		City	Zip Code	
Phone	Email A	.ddress		
Name:		Comple	Completion Date of Travel Troop Training:	
Address		City	Zip Code	
Phone	Email A	ddress		
		Completion Date of Travel Troop Training:		
Address		City	Zip Code	
Phone	Email A	.ddress		
	_		FOR COUNCIL USE ONLY Date Received Council Staff Initials Date of Acknowledgment	