



2016-2017 Adult Member Registration Form

Farthest North Girl Scout Council • Council Code: 600 • Adult Membership \$15 per Girl Scout Year

PLEASE PRINT CLEARLY

CONTACT	Troop #:	or Individual <input type="checkbox"/>	Service Unit:	ID#	MEMBERSHIP EXPIRATION	
	<input type="checkbox"/> New Member (first time registering) <input type="checkbox"/> Re-registering <input type="checkbox"/> Lifetime Membership (Information update, no dues required)					9 - 30 - 2017
	<input type="checkbox"/> Female <input type="checkbox"/> Male		Number of years in Girl Scouts as a girl: _____ as an adult: _____			
	<input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Mr.		Last name while girl member:			
	First Name:		Middle Name:		Last Name:	
	Mailing Address:				Apt. #:	PO Box:
	City:		State:	Zip:	Phone: ()	
	<input type="checkbox"/> Check if this is a new address within the last year.			Previous Address:		
	<input type="checkbox"/> Check if your name has changed in the last year.			Previous Name:		
	Do you have a spouse or life partner? <input type="checkbox"/> yes <input type="checkbox"/> no			Name:		
E-mail:						
Employer:		Position:		Work Phone: ()	Cell Phone*: ()	

POSITION	Troop #:	Position with Troop: (check only one)	<input type="checkbox"/> Troop Leader <input type="checkbox"/> Assistant Troop Leader or Co-Leader	<input type="checkbox"/> Troop Helper <input type="checkbox"/> Troop Cookie Manager	
	Troop #:	Position with Troop: (check only one)	<input type="checkbox"/> Troop Leader <input type="checkbox"/> Assistant Troop Leader or Co-Leader	<input type="checkbox"/> Troop Helper <input type="checkbox"/> Troop Cookie Manager	
	Other Position/s (check all that apply):		<input type="checkbox"/> Volunteer <input type="checkbox"/> Board Member <input type="checkbox"/> Nominating Committee Member	<input type="checkbox"/> Council Staff <input type="checkbox"/> Board Committee Member <input type="checkbox"/> Other: _____	
<input type="checkbox"/> Service Unit Team Member <input type="checkbox"/> Trainer					

By completing the following optional questions, you can help ensure community support and funding for Girl Scouts. Girl Scouts respects and welcomes people from all backgrounds and abilities. This information is used for statistical purposes only. Thank you for providing the information requested.

MEMBERSHIP	Race/Ethnicity/Language (Complete A, B & C)		A. Mark one or more:	<input type="checkbox"/> Alaskan Native <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> African American	<input type="checkbox"/> Hawaiian or Pacific Islander <input type="checkbox"/> Caucasian <input type="checkbox"/> Other	B. Are you Hispanic/Latino? <input type="checkbox"/> yes <input type="checkbox"/> no	
	C. First language, if not English: _____						
	Birthdate: MM / DD / YYYY		My age range is: (Optional)		<input type="checkbox"/> 18-29 <input type="checkbox"/> 30-49 <input type="checkbox"/> 50+		
	Annual House Income: (Optional) (check one)		<input type="checkbox"/> <\$50,000 <input type="checkbox"/> \$50,000 to \$100,000 <input type="checkbox"/> \$100,000+	<input type="checkbox"/> My daughter qualifies for free or reduced-price lunch.			
I would like to contribute:		<input type="checkbox"/> \$25.00 <input type="checkbox"/> \$150.00 <input type="checkbox"/> \$50.00 <input type="checkbox"/> \$200.00	<input type="checkbox"/> \$100.00 <input type="checkbox"/> Other: \$ _____	Credit Card # _____ Exp. date: _____ Signature: _____			

PAYMENT	<input type="checkbox"/> Girl Scout Ambassador graduating High School Lifetime Membership \$195 (Must submit by Sept. 1 st) <input type="checkbox"/> I would like to register as a Lifetime Member \$375
	<input type="checkbox"/> I am requesting assistance with the \$15 annual membership dues. I can pay \$ _____ toward the \$15 dues.
	<p>We acknowledge that the registrant will make the Girl Scout Promise and accept the Girl Scout Law. The registrant has our permission to join Girl Scouts. We understand that when participating in Girl Scout activities the registrant may be photographed for print, video, or electronic image. We understand that the images may be used in promotional materials, news releases, and other published formats for either the local Girl Scout Council or Girl Scouts of the U.S.A. We acknowledge that the images will be the sole property of either the local Girl Scout Council or Girl Scouts of the U.S.A.</p> <p>Signature: _____ Date: _____</p>

Data Privacy Policy: Girl Scouts is committed to respecting the privacy of our members. We do not sell or trade membership lists, contact information, or any other personal data about individual members for any reason.

<input type="checkbox"/> Cash <input type="checkbox"/> CK# <input type="checkbox"/> Charge <input type="checkbox"/> Financial Aid			
<input type="checkbox"/> Troop <input type="checkbox"/> Camp <input type="checkbox"/> Staff <input type="checkbox"/> Board <input type="checkbox"/> Indiv. <input type="checkbox"/> Other			
Office Use Only: Date Received: _____	Initials: _____	Receipt# _____	E-Council Entry: _____