



Girl Scout Program Application

Basic Information

Troop Leader: _____

Troop Council: _____ City: _____

Troop Leader Phone: _____

Troop Leader Email: _____

Program Selection (Check one)

- | | |
|--|------------------------|
| _____ Girl Scout Daisy 'Clean up the World' K-1 Grades | How many scouts? _____ |
| _____ Girl Scout Brownies 'Bug School' 2-3 Grades | How many scouts? _____ |
| _____ Girl Scout Junior 'Flower Power' 4-5 Grades | How many scouts? _____ |

Number of Leaders and Chaperones: _____

Date(s) and Time Requested: _____
1st Choice 2nd Choice

Trailhead Location (Check one)

- | | |
|--|---|
| <input type="checkbox"/> Arroyo Pescadero, Whittier | <input type="checkbox"/> Hacienda Hills, Hacienda Heights |
| <input type="checkbox"/> Powder Canyon, La Habra Heights | <input type="checkbox"/> Sycamore Canyon, Whittier |



REGISTRATION FORM

DATE: _____

Release of Liability, Medical Disclosure. Right to Use Photo

I hereby release and discharge and agree to indemnify and hold harmless the Puente Hills Habitat Preservation Authority (Habitat Authority), its constituent members, Directors, Officers, employees and agents, from and against all claims, demands, actions, and/or judgments for death, personal injury and/or damages to property which may be sustained as a result of my participation, or my child's or children's or ward's participation, in the activity or activities to be conducted on Authority property, which is defined as property owned or managed by Authority.

This release is in partial consideration for permission granted by Authority to participate in the activity or activities. I understand that Authority does not provide any form of compensation, insurance or benefits for activity participants. I acknowledge that Authority does not have medical personnel on the property and I agree if participant or I have a medical condition that requires or may require medical attention, participant or I will engage in the activity or activities at my/his/her own risk.

Authority may take pictures of this activity or activities. I agree that Authority may use my or participant's likeness in Authority brochures, educational and interpretive materials.

I have read this form and understand its terms and agree that I have voluntarily signed it with full knowledge of its content and meaning.

Parent/Guardian must sign for children under 18 years old

Signature _____ **Participant Name** _____