

This permission slip must be signed by a parent/guardian and turned in at the event.

Event Name: \_\_\_\_\_

Girl's Name: \_\_\_\_\_

**PARENTAL PERMISSION:  
MUST BE COMPLETED BY THE PARENT/GUARDIAN  
OF GIRLS REGISTERING INDIVIDUALLY.**

Does your daughter have any special health considerations/needs we should be made aware of?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_

Relationship to Participant: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Yes  No

My daughter/ward \_\_\_\_\_ (GIRL'S NAME), has my permission to attend this event.

Yes  No

The bearer of this letter has my permission, as a parent or legal guardian, to act on my behalf in an emergency dealing with the health and welfare of my daughter/ward, and to obtain emergency treatment for her by a licensed physician.

Yes  No

(For non-registered girls) I understand that my daughter/ward is NOT a registered member of GSUSA, and is therefore not covered by GSUSA's limited insurance in case of injury or accident

Signature of Parent/Guardian: \_\_\_\_\_

Phone where you can be reached: \_\_\_\_\_ Date: \_\_\_\_\_