



Troop Family Meeting One – Kick Off the Year

Purpose: Start your Girl Scout year by holding a family meeting to meet families, set expectations, build support, and recruit troop volunteers.

Activity	Materials
Getting Started + Introductions	<ul style="list-style-type: none"> ■ Writing Utensions ■ Forms (Permission Slip, Health History Form, and Family Interest Survey; also located below)
Girl Scouts Overview	
All About the Troop	
Troop Finances	
Caregiver Expectations and Communication	
Wrap Up	

Getting Started + Introductions

Materials Needed: Writing utensils; materials for girl activity; Forms - permission slips, health history forms, family interest survey

Please note: It's often easier for families to meet if they can bring their girl along. Plan on having an easy activity to occupy girls. Something as simple as a coloring page is perfect! Another great option is to meet with your families virtually on Zoom.

1. Greet families and take attendance so you can follow up with families who weren't able to attend.
2. Collect any forms (permission slips, health history forms, family interest survey) as everyone gets settled. You can also have extra forms on hand in case parents/guardians forget to bring them.
3. Thank everyone for coming. Introduce yourself, then have parents/guardians introduce themselves.

Girl Scouts Overview

1. Explain that your role as a troop leader is to work in partnership with girls to discover and explore what girls are interested in.
2. Explain that the mission of Girl Scouts is to build girls of courage, confidence, and character who make the world a better place. We do this through three key ways: girl-led, learning by doing, and cooperative learning. That means girls have a big say in what they do, do hands-on activities, and work together as a team.



All About Your Troop

1. Review details about your troop:
 - Your troop's program grade level and troop number.
 - Your troop meeting dates, times, and location.
 - Pick-up and drop-off protocols. Review your expectations for how girls will be dropped off and picked up. Go over what to do in case parents/guardians are late dropping off or picking up

Troop Finances

1. Review the general costs for a Girl Scout year and how troop money will be earned and managed.
 - **Troop dues.** If you'll be collecting troop dues from families, decide on the amount and frequency. Explain what these dues will be used for. Families may ask why they need to pay troop dues if they've already paid membership dues. Explain that membership dues are paid directly to Girl Scouts of the USA and covers liability insurance, while troop dues help cover the cost of project supplies, badges, etc. Share that GSRV has a generous [Financial Assistance](#) policy to make Girl Scouting accessible to every girl. Families can request assistance for paying for troop dues, startup program materials, and more!
 - **Program materials and uniforms.** Let families know what materials they'll need to start off the Girl Scout year. Decide who is responsible for purchasing these materials (you as the troop leader collect payments from families and buy them, or each family is responsible for purchasing their own.) If families will be purchasing on their own, let them know about the [Girl Scout Shop](#) and what materials to purchase right away.
 - **Snacks & Magazines and Cookie Programs.** Explain that these are two programs that girls can participate in to build financial literacy and leadership skills. The money that girls earn from these programs can also help cover troop costs (like field trips, camp, etc.).

Parent/Guardian Expectations and Communication

1. Explain that there are many ways that families can be involved with the troop. Let parents and guardians know that you expect them to play an active role in supporting the troop—when troops have family support, girls have a better overall experience.
2. Review the troop's specific volunteer needs (transporting girls, bringing in snack, other volunteer roles like troop treasurer, troop cookie manager, etc.). Remind parents/guardians that any adult who has regular contact with girls, handles money, or drives girls must be a registered member and complete a background check. They can fill out the Family Interest Survey for you to learn a bit more about them and the ways they feel like they can support the troop! Let them know that they can help [welcome new Girl Scouts](#) to the troop and share our resources with them.
3. Review how you will be keeping in touch with families to relay information about upcoming meetings, activities, and troop business. Remind families that it's their responsibility to read any information and get back to you (if needed) in a timely manner.

Wrapping Up

1. Thank families for attending and ask if they have any questions.



Annual Girl Scout Permission Slip for 2023-2024

Complete this form at registration. This form will be retained by the troop leader.

Girl's Name: _____ Troop: _____ Date of Birth: _____

Address: _____ City, State, Zip: _____

Phone: _____ Grade in Fall: _____ School: _____

My girl has permission to travel to, attend, and participate in troop and council sponsored activities that are less than four hours drive from meeting location, two nights or less, and not considered high-risk activities as outlined by Girl Scouts River Valleys.

Permission for Trips:

Yes No*

**By checking "No" I am requesting to sign individual permission slips for each activity.*

Parent/Guardian Contact Information

Name: _____ Relationship to Girl: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Emergency Contact

In the event of an emergency, the following person is authorized to act in my behalf if I cannot be reached:

Name: _____ Relationship to Girl: _____

Address: _____ City, State, Zip: _____

Phone: _____ Secondary Phone: _____

Medical Information

Physician's Name: _____ Physician's Phone: _____

Clinic/Hospital Address: _____ City, State, Zip: _____

Additional Remarks: _____

Note: *Participants with allergies must fill out an Allergy and Anaphylaxis Emergency Action Plan form found online at: gsrv.gs/allergy-form.*

Parent/Guardian Agreement

I have read and understand this annual permission slip. I may change or revoke any aspect of this agreement at any time by submitting my request, in writing, to the troop leader.

Parent/Guardian Name (Print): _____ Date: _____

Parent/Guardian Signature: _____

GIRL MEMBER ADULT MEMBER

CONTACT INFORMATION	Troop #: _____ or Individual <input type="checkbox"/>		Service Unit: _____		
	First Name: _____		Middle Name: _____	Last Name: _____	
	Mailing Address: _____		Apt. #: _____	PO Box: _____	
	City: _____		State: _____	Zip Code: _____	Phone: _____
	Cell: _____		E-mail: _____		
	Parent/Guardian(s) Name and address (If different from girl's): (Complete for girl form only) 1. _____			Phone: _____ Cell: _____	
	Parent/Guardian(s) Name and address (If different from girl's): (Complete for girl form only) 2. _____			Phone: _____ Cell: _____	
	Custodial Care Information: <input type="checkbox"/> Both Parents <input type="checkbox"/> One Parent (specify): _____ <input type="checkbox"/> Other: _____				

HEALTH INFORMATION	Name of Family Physician: _____		Phone: _____		
	Family Medical/Hospital Insurance Carrier: _____		Policy or Group No: _____		
	Family Dental Insurance Carrier: _____		Policy or Group No: _____		
	Health Information: Age: _____ Date of Birth: _____ <input type="checkbox"/> Immunizations are up to date.				
	Date of last Tetanus shot: _____				
	Date of last health examination: _____		Were there any medical problems at the time? _____		
	Does participant have any physical, mental or psychological conditions requiring medication, treatment, or other special restrictions or considerations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state medication and reason: _____				
	Does participant take any prescribed medications or over-the-counter drugs on a regular basis? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state medication and reason: _____				
	Is participant restricted or limited from participating in any physical activity? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____				
	Please provide a record of past medical treatment, if any, including injuries or surgeries: _____				
Participant has the following health conditions/allergies/dietary restrictions (food and medications): <input type="checkbox"/> ADHD <input type="checkbox"/> Asthma <input type="checkbox"/> Diabetes <input type="checkbox"/> Headaches <input type="checkbox"/> Seizures <input type="checkbox"/> Other: _____					
<input type="checkbox"/> Allergies (specify): _____					
Emergency Contact (non-parent): _____					
Relationship: _____		Phone: _____		Cell: _____	

AUTHORIZATION	PARENT/GUARDIAN AUTHORIZATION			
	This health form is complete and accurate. I know of no reason(s), other than the information indicated on this form, why my daughter/girl should not participate in the prescribed activities except as noted. In the event that my daughter/girl needs medical attention while participating in Girl Scout activities, I authorize the adult in charge to see that my daughter/girl receives routine healthcare, medications, reasonable first aid and to transport my child to a health care facility for emergency services as needed.			
Signature of parent/guardian: _____			Date: _____	
ADULT MEMBER AUTHORIZATION				
This health history is complete and accurate. I am able to engage in all prescribed activities except as noted.				
Signature of adult member: _____			Date: _____	

Parent - Please retain a copy for day camp, resident, and other overnight camp programs. Troop Leader - please retain for your records.



Girl Scout Family Interest Survey

Our troop has awesome plans for the upcoming year, and we need your help. Every family is needed to provide support and resources to achieve our Girl Scouts' goals this year!

Adult Name: _____ Girl Scout's Name: _____

Email Address: _____ Cell Phone: _____

- I'm registered as a Girl Scout member and my background has been checked!
- I'm not registered as a Girl Scout member yet

To become an adult member, join at **GirlScoutsRV.org/Join** or call 800-845-0787.

I am willing to help my child and the troop by providing support such as:

- Providing transportation
- Being a trip/event chaperone
- Helping plan and coordinate field trips
- Organizing troop outdoor activities (hikes, camping, etc)
- Being a troop treasurer
- Assisting Girl Scouts at troop meetings
- Providing snacks for troop meetings
- Being the troop Cookie Manager
- Organizing troop cookie booths
- Helping plan and coordinate community service projects
- Being the troop social media coordinator
- Being the troop photographer
- Helping [welcome new families to the troop](#)
- Sharing my skills such as (check all that apply):
 - Sports (Please specify: _____) Health & Fitness Engineering
 - Computers (coding, cybersecurity, video games) Gardening Cooking
 - Crafts Writing Art Music Dance Business
 - Environmental Stewardship Outdoor skills (camping, tents, geocaching, hiking, etc)
 - Water skills (canoeing, kayaking, sailing, etc) Volunteerism
 - Other. Please specify: _____

I have training or experience that might be helpful:

- First Aid or safety-related training. Please specify: _____
- Teaching, coaching, or mentoring. Please specify: _____
- Previous Scouting experience. Please specify: _____
- Other. Please specify: _____

My job or business might be of interest to this troop: _____

Is there anything else we should know that could be helpful?