

Service Unit Event Check In

Event name: _____ Date: _____

Event location: _____

Volunteer contact: _____

If this event was only for currently registered girls, please keep this contact list for your records. If girls who are not registered Girl Scouts attended, please send this contact list to Customer Care at customercare@gsmaine.org.

Girl Check In:

Girl's name: _____ Grade: _____

School: _____ Zip: _____

Girl's parent's name: _____

Parent email: _____ Phone: _____

Current member Non-member

Girl's name: _____ Grade: _____

School: _____ Zip: _____

Girl's parent's name: _____

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