Girl Scouts

Girl Scouts of North East Ohio

GSNEO Service Unit Camping Roster (PLEASE COMPLETE ONE PER SITE)

☐ GSNEO
Central/North Office
One Girl Scout Way
Macedonia, OH 44056-2156
330-864-9933
330-467-1901 (fax)

☐ GSNEO
North Office
4019 Prospect Ave Ste 240
Cleveland, OH 44119
216-481-1313
330-467-1901 (fax)

☐ GSNEO
South Office
1010 Applegrove St NW
N. Canton, OH 44720
330-433-9485
330-499-4475 (fax)

☐ GSNEO
East Office
980 Warren Ave
Niles, OH 44446
330-652-5876
330-544-7959 (fax)

☐ GSNEO
West Office
6111 S. Broadway Ave
Lorain, OH 44053
440-233-6112
440-233-7393 (fax)

Please fill out completely &send to the corresponding service center no later than 3 weeks prior to your camp date. All attending must be registered Girl Scouts OR additional insurance must be purchased for non Girl Scout members attending. Please contact council for details.

Date **SU#** **Troop#** **Camp Name** **Site Name**

Adults Attending (please check to indicate)

Name	Leader	First Aid	CPR	Camp Trained	Registered GS

Girl Scouts Attending (please list only girls that are attending - use back if necessary)

Name	**Registered GS** (circle ONE)	**County**	**PS**	**HF**	**Photo**
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				
	YES / NO				

✓ **to indicate: PS = Permission Slip; HF = Health Form; Photo = is allowed to be photographed**

Racial/Ethnic Information: Indicate # of girls in space below *(information will help program funding)* ____ Hispanic/Latino _____White/Caucasian

____ American Indian/Alaskan Native ____Asian ____ Black/African American ____ Hawaiian or Pacific Islander _____Other (please specify)