

Girl Scouts of Eastern Missouri

ADULT EDUCATION COURSE REGISTRATION CARD

Use this card to register for only one course. Complete both sides. PLEASE PRINT.

Please mail completed card to course registrar. See the *Course Catalog* for complete instructions and registrar's address.

Course # _____ Title _____

Date _____ Location of Course _____

Your Full Legal Name _____

Address _____ City _____ State _____ Zip _____

Day phone (____) _____ Evening phone (____) _____ Email _____

District _____ Neighborhood _____ School _____

Troop Grade Level: Daisy Brownie Junior Cadette Senior Ambassador

Present Positions: (check all that apply) Troop Leader Co-Leader/Assistant Leader Troop Organizer
 GS Senior GS Ambassador Neighborhood/District Chair Learning Facilitator Other _____

Past Girl Scout Leadership Experience: Daisy _____ yrs. Brownie _____ yrs. Junior _____ yrs. Cadette _____ yrs.
 Senior _____ yrs. Ambassador _____ yrs.

Approximate date I attended Introduction to Girl Scouting _____

— PLEASE COMPLETE OTHER SIDE —

T-26 10/22/09

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Girl Scouts of Eastern Missouri (GSEM) encourages you to provide voluntarily the following information to help improve outreach efforts and ensure that the physical needs of participants are met.

Do you have a disability: No Yes (please check type):
 Speech Physical Visual Hearing
 Specific Learning Disability _____
 Other impairments _____

Please indicate any special needs _____

Female Male

Race/Ethnic Group: White Black or African American
 American Indian or Alaskan Native
 Asian
 Hawaiian or Pacific Islander
 Other (specify) _____
 Hispanic or Latino Not Hispanic or Latino

Photo Release:
 I, _____, being of legal age, hereby consent that photographs, digital images, film, video and/or audio recordings taken of me may be used by GSEM, Girl Scouts of the USA and their assignees or successors, in telling the Girl Scout story. This may include publications, events and media. Furthermore, I consent that such photographs, digital images, film, video and/or audio recordings shall be the property of GSEM which has the right to duplicate, reproduce and make other uses in the best interest of Girl Scouting, free and clear of any claim whatsoever on my part.

Signature _____ Date _____

FOR LEARNING FACILITATOR'S USE ONLY

Date of Course Attendance _____
 Cancelled No Show Drop In **Course Completed:** Yes No

 Learning Facilitator's Signature and District

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