



# Girl's Night Out

**Who: All girls in grades K- 12. Bring a friend and receive a special patch!**

Friend must register to participate.

**Time:** 6:00–9:00 p.m.

**Place:** Eugene Service Center, 1577 Pearl St.

**Dates:** Please check the box of the month(s) you will be attending

**January 20 - Wild Girls workshop with the Whole Earth Nature School**

Get in touch with nature! **Registration deadline: Jan. 17**

**February 24 - Thinking Day**

Celebrate Girl Scouting around the World with fun activities from around the globe! **Registration deadline: Feb. 21**

**March 16 - Girl Scouts' 100th Birthday**

Come to a party for Girl Scouts' Birthday! **Registration deadline: Mar. 13**

**Other Details: Cost is \$12.** All events include program supplies and snack. Adults should stay for the first 20 minutes to get current information about Girl Scouting. The first time a girl attends a *Girl's Night Out* (if she isn't a registered Girl Scout yet) she will get a FREE Girl Scout membership *through Sept. 30, 2012*. Financial assistance is available for all girls on request\*. Refunds or transfers are available if cancellations are on or before the registration deadline. No transfers or refunds after the registration deadline.

## Yes! I want to attend!

Girl Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Alt. Phone ( ) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Allergies or other health concerns \_\_\_\_\_

I would like more information about joining a Girl Scout troop or I am already a Girl Scout in troop # \_\_\_\_\_

I am interested in volunteering  Other, Instructions \_\_\_\_\_

I give my permission for my daughter to join Girl Scouts, to attend this program, to participate in all activities, and to receive emergency medical treatment, if necessary. I understand when participating in Girl Scout activities the registrant may be photographed for print, video, or electronic imaging. I understand that the images may be used in promotional material, news releases, and other published formats for either this council or Girl Scouts of the U.S.A. I acknowledge that the images will be the sole property of this council or Girl Scouts of the U.S.A. I certify that my daughter is in good health and has not been recently exposed to any contagious diseases.

**Signature of Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Thank you for completing the voluntary section below to help us better serve Every Girl, Everywhere.**

- The registrant's *ethnic* background is (please check one):  Hispanic or Latina  Not Hispanic or Latina
- The registrant's *racial* background is (check as many as apply):  American Indian or Alaskan native  Asian  Black or African American  Hawaiian or Pacific Islander  White  Other, please specify \_\_\_\_\_

**PAYMENT SUMMARY:**  Cash  Check, payable to GSOSW or

\*Financial assistance:  Membership (not a Girl Scout yet)  Discovery Program: \_\_\_ \$12 \_\_\_ \$8 \_\_\_ \$6 \_\_\_ \$4 \_\_\_ \$2 \_\_\_ other \$ \_\_\_\_\_

Visa/MasterCard \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Signature (for credit card only): \_\_\_\_\_ Amount Paid \_\_\_\_\_