



<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____

Girl Scout Council of Southeastern Massachusetts
 111 East Grove Street . Middleboro, MA 02346 . www.gscsm.org
 T 508 923 0800 . 800 242 0925 . F 508 923 7676
2007-2008 ADULT MEMBERSHIP REGISTRATION

Fall 07 - Spring 08 troop # _____

The \$10 annual membership fee for Girl Scouts of the USA must accompany this form. We will forward it, in its entirety, to GSUSA in New York.

Please also consider making a voluntary, tax-deductible contribution to support Girl Scouts in our area! Please enclose a separate check for your donation payable to Girl Scout Council of Southeastern Massachusetts (no credit card info here, please). Thank you! DONATION: \$ _____

Check One: New Member Returning Member

***Circle one:** Daisy (K) Brownie (Gr1-3) Junior (Gr4-6) Teen (Gr6-12)

* All registered troop adults are considered members of the troop's volunteer team. Registering with a troop does not mean you are "the leader". Please help us to better understand your role by checking one of the following: Active Leadership Occasional Help

Affiliating with a second troop? Troop # _____ Level: _____ Check One: Active Leadership Occasional Help

Adult Member Information
 Adult's Name: First _____ Middle _____ Last _____
 Home Address _____ Apartment # _____ Town _____ State _____ Zip _____
 Mailing Address (if different from above) _____
 Home Phone () _____ Cell Phone or Pager Number () _____
 Fax Number () _____ Email _____
 Employer _____ Occupation _____
 Business Phone () _____ Number of years in Girl Scouts as a girl _____ As an adult _____
Please help us evaluate our effectiveness at increasing the diversity of our membership. PLEASE CHECK ALL THAT APPLY:

<input type="checkbox"/> American Indian and Alaska Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American
<input type="checkbox"/> Hawaiian or Pacific Islander	<input type="checkbox"/> White	<input type="checkbox"/> Other (please specify) _____
The registrant's ethnic background is: (Check One)	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Not Hispanic or Latino
I am an adult: <input type="checkbox"/> Female <input type="checkbox"/> Male	My age range is: <input type="checkbox"/> 18-29 <input type="checkbox"/> 30-49 <input type="checkbox"/> 50 and up	
The highest education level completed is: (Please Check One)	<input type="checkbox"/> Some High School <input type="checkbox"/> High School <input type="checkbox"/> Some College	
	<input type="checkbox"/> Associate's Degree <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Postgraduate	

I give my permission to volunteers and agents of Girl Scout Council of Southeastern Massachusetts to obtain and administer medical aid, including that of a licensed physician that might be required for my immediate care in an emergency. Girl Scout Council of Southeastern Massachusetts may use photographs of me for public relations, in publications, and on the web. The council staff and designated volunteers may contact me regarding Girl Scout events and business. I accept financial responsibility for products and money I receive during product sale fund-raisers and on behalf of girls or troops. I understand that to insure the safety of our girl members, GSCSM complies with Chapter 385 of Massachusetts state law and runs criminal background checks on adult members.

Signature_____
Maiden name_____
Date of birth_____
Signature date**TROOP PLACEMENT REQUEST (REQUIRED FOR ALL NEW MEMBERS AND THOSE MOVING TO A DIFFERENT TROOP)**
 Days and/or times **NOT** good for troop meetings: _____
 Troop choice (if known) – Please detail specific requests below. If you have no preferences, leave bulleted items blank.
 ➤ Please place me in troop number _____
 ➤ Please place me in the same troop as (girl/s name) _____
 ➤ Please place me in the troop with which _____ volunteers.
 ➤ Please place me in a troop that meets at (site): _____ on day and time: _____
 Additional information that may help us find a good match for you _____

We will do our best to honor requests for placement in a specific troop, but all assignments are based on available space.

Adult Lifetime Membership Registration (Optional)

Lifetime Membership is for adults 18 or older and high school graduates (or equivalent). The fee is \$250. Make check payable to GSCSM. We will forward the fee, in its entirety, to Girl Scouts of the USA in New York.

 ❖ If registering as a Lifetime Member, check here: