

Date:						
Troop #:						
Service Unit:						
Troop Level:	D	В	J	С	S	А

TRAVEL APPLICATION

All overnights from backyard camping through international require approval using the *Travel Application*.

- Submit at least 6 weeks before travel for in-town overnights at non-council owned property or one- or two-night trips.
- Submit at least 12 weeks before travel if traveling three or more nights.
- Submit 6-24 months before international travel (as soon as trip is selected with travel vendor; update final details 6 months prior).

Leader Name:							
Address:		City:	St:	Zip	Code:		
Phone:		Email:	Email:				
Emergency Contact at D	estination (an adult v	who is traveling with the troop	and can be contacted in case c	of emergency):			
Name: Day Phone:			Evening Phone:				
Emergency Contact at He	ome (an adult who is	not traveling with the troop, t	out can be contacted in case of	emergency):			
Name:		Day Phone: Evening Phone:					
Travel Basics:							
Number Registered:	Youth	Adults	Number Participating:	Youth	Adults		
Travel Length/Type	□ Day trip	One or Two Nights	□ Three or more nights	International	al		
Departure Date & Location:			Return Date & Location:				
Destination(s):							

What is the purpose of this trip (i.e. service, eco-tourism, etc.)?

Participants: (list age and grade at time of travel)

Girl's Name	Age	Grade	Girl's Name	Age	Grade	Adult's Name	TL	TS
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All youth participants are currently registered members of Girl Scouts Kansas Heartland.

All adult participants are currently registered members and approved volunteers of Girl Scouts Kansas Heartland. TL=Troop Leader, TS=Troop Support

Transportation:

Modes of transportation (check all that apply and include details on the itinerary such as flight numbers or rental companies):

□ Private Vehicle □ Leased/Rented Vehicle □ Bus □ Train □ Airplane □ Watercraft □ Other_____ Note: Consult Safety Activity Checkpoints for detailed requirements before considering use of ride-shares such as Uber or Lyft.

Drivers:

□ I understand that each driver may only drive for six hours per day with a break every two hours. We will have a relief driver(s) for trips over six hours. We will plan to drive in daylight hours. *If applicable, attach a list with additional driver(s) information.*

Name:	D.L. #	Insurance Co.:	Policy #:
Name:	D.L. #	Insurance Co.:	Policy #:
Name:	D.L. #	Insurance Co.:	Policy #:

Route of Travel:

□ We will use the most direct route of travel as found in map applications (ex: Google Maps). If detouring from the direct route, waypoints are included in detailed itinerary.

Itinerary and Lodging:

Attach a detailed day-to-day itinerary including activity, location, contact information, approximate time frame, and cost. Include lodging details for each night including address and contact information.

Note: Contact council staff and consult Safety Activity Checkpoints for detailed requirements before considering use of AirBnB, VRBO or other "by owner" lodging sites. Proof of adherence to these requirements is required for travel approval.

- Leader/Advisor has reviewed and agrees to follow Volunteer Essentials and Safety Activity Checkpoints: Travel.
- Leader/Advisor has reviewed and agrees to follow applicable Safety Activity Checkpoints for planned activities. Which Safety Activity Checkpoints have been reviewed?

Note: Proof required certifications for high-risk activities may be required.

Certifications and Training:

List the name of certified adult for each area. A First Aider is **always required.** If certification was completed outside of Girl Scouts, attach a copy of the certificate.

	REQUIRED: First Aid/CPR
	Outdoor Camping
	Lifeguard and/or Small Craft Safety
	Other certifications as required by Safety Activity Checkpoints
Bu	lget:
Cos	t per girl: \$ Cost per adult: \$ Total Budget: \$
	The troop has adequate income sources to support the cost of the trip, including available troop funds, anticipated product program or money earning proceeds, program credit requests, and family contributions. The troop has an emergency fund of \$ available to cover unexpected trip expenses. Details for anticipated expenses for transportation, lodging, activities, food, and insurance are noted on the provided ititnerary.
ls y	bur troop/group requesting payment of program credits? Note: Program credits may be used for approved troop trips. Leader must submit the Troop Program Credit Request at least four weeks before travel, including parent signatures for each individual.

Permission, Authorization, and Insurance:

- I agree to collect all applicable paperwork from each participant based on length or type of trip as listed below.
- I agree to purchase supplemental insurance *two weeks* prior to travel, if required by type of trip. Contact the Girl Scouts of Kansas Heartland at 1-888-686-MINT (6468) to purchase additional insurance (plans begin at \$0.70 per person per day).

Day Trips and One- or Two-Night Trips

- Health History and Authorization form must be collected by the leader for each youth and adult participant.
- Registered Girl Scouts (youth and adults) are automatically covered by Girl Scout Activity Insurance.
- Optional Accident plus Sickness Insurance can be purchased (plan begins at \$0.70 per person per day).

Three or more night trips

- Health History and Authorization plus Medical Exam form must be collected by the leader for each youth participant.
- Health History and Authorization form must be collected by the leader for each adult participant.
- Registered Girl Scouts (youth and adults) are automatically covered by Girl Scout Activity Insurance.
- Optional Accident plus Sickness Insurance can be purchased (plan begins at \$0.70 per person per day).

International travel

- Troop/Group is working with the following Girl Scout affiliated tour company:
 Explorica EF Tours Holbrook Travel Hostelling International
- Health History and Authorization plus Medical Exam form must be collected by the leader for each youth participant.
- Health History and Authorization form must be collected by the leader for each adult participant.
- Notarized Permission to Travel Form for Minors must be collected by the leader for each youth participant.
- Notarized Authorization for Medical Treatment for Minors form must be collected by the leader for each youth participant.
- All trip participants must have valid passports. Leader will photocopy passports in order to carry one additional copy and leave one copy with emergency contact at home.
- Supplemental insurance is required with a cost of \$1.17 per person per day.

Leader/Advisor Statement of Compliance:

I have read all Girl Scouts of Kansas Heartland policies and procedures in regard to troop travel (Volunteer Essentials, Safety Activity Checkpoints) and verify that all information on this request is accurate and in accordance with GSKH policy.

- All youth participants are currently registered members of Girl Scouts Kansas Heartland.
- All adult participants are currently registered members and approved volunteers of Girls Scouts Kansas Heartland.
- All drivers for these activities are properly licensed and all vehicles are registered, insured, maintained and have a seat and seatbelt for every passenger.
- Safety Activity Checkpoints and all health, safety and emergency procedures have been reviewed and are being adhered to.
- All certified adult participants are able to perform in their capacities according to GSUSA health and safety guidelines.
- Parents/guardians are informed of the trip activities, safety and emergency procedures, and contact information.
- Appropriate permissions and authorizations have been obtained for each youth.
- Our troop will conduct ourselves at all times in a positive manner while representing Girl Scouts.
- I understand providing misinformation could result in the trip not being covered by Girl Scout Activity Insurance and could increase
 personal liability.

Leader/Advisor Signature:

Date: _____