

Troop Number: _____ Council: _____

Adult Leader On-Site Contacts: #1 _____ #2 _____

Cell Phone #: #1 _____ #2 _____

Date of Arrival: _____ Estimated time of Arrival: _____

Date of Departure: _____ Estimated time of Departure: _____

	Participant Name (Alpha order)	Youth or Adult?	Emergency Contact Name	Emergency Contact Relation	Emergency Contact Phone #	First Aid Certification Attached*
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

*Adults only: Provide proof of first aid certification. Required for giving troop first aid and/or medications during GIRL Fest. Event first aid will be available for treatment and/or medication dispensing if no certification is returned. Acceptable documents: current first aid card/certificate; medical profession ID cards: physician; physician's assistant; nurse practitioner; registered nurse; licensed practical nurse; paramedic; military medic; wilderness training, certified lifeguard, or emergency medical technician (EMT).