



**GIRL SCOUTS OF EASTERN OKLAHOMA
FALL PRODUCT PROGRAM ACTIVITY
PARENT/GUARDIAN PERMISSION AND RESPONSIBILITY FORM**



Dear Parent/Guardian:

Order Taking: September 27 - October 13, 2019

The council's Fall Product Program activity is coming up! Your daughter will have the opportunity to be a part of this exciting and fun way to earn money for troop/group activities planned for the beginning of a new Girl Scout year.

Your daughter's participation in the product program activities will be a good learning experience for her. While participating your daughter will learn important life skills, including: GOAL SETTING, DECISION MAKING, MONEY MANAGEMENT, PEOPLE SKILLS and BUSINESS ETHICS. Please make sure that your daughter understands her Girl Scout leader's instructions about this activity. Your assistance will mean a great deal to your daughter and her troop/group. Please review the Fall Product Program activity materials and suggest family members, friends and neighbors on whom she can call.

Since safety is the top priority, please review the following "Safety Guidelines" with your Girl Scout.

Girls must:

- * Be a registered Girl Scout (any level - Daisy through Ambassador).
- * Sell only to family, neighbors and friends.
- * Never go alone. Girls must always be accompanied by an adult if Daisies, Brownies or Juniors; older girls must be supervised by an adult.
- * Wear her Girl Scout uniform and/or pin proudly and identify herself as a Girl Scout.
- * Never enter a stranger's house. Never carry a lot of money.
- * Follow age-appropriate online marketing safety rules.

Member Agency



The permission slip below must be returned to your daughter's troop leader or product program manager before she can participate in this program.

Thank you for your support of Girl Scouting!



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**GIRL SCOUTS OF EASTERN OKLAHOMA
PARENT PERMISSION & RESPONSIBILITY FOR FALL PRODUCT PROGRAM ACTIVITY**

My daughter, _____, a member of Girl Scout Troop # _____, has my permission to participate in the 2019 Fall Product Program Activity. She will observe the "Safety Guidelines" and have adult supervision at all times. I agree to give payment directly to the troop product program manager or leader by the dates requested.

I understand that I am assuming personal responsibility for all products and money received and for full payment due to the troop/group and Girl Scouts of Eastern Oklahoma. **Products cannot be returned or exchanged.**

I understand that failure to account for money and products received will be considered misappropriation of funds, and all unpaid funds will be turned over to a collection agency or the courts for action.

Signature of Parent/Guardian

Date

Printed Name

State ID/ Driver's License #

State (if not Oklahoma)

Address

City

State

Zip

Home Phone

Work Phone

Cell Phone