

Girl Scouts of Southern Illinois
Volunteer Opportunities Registration Form
Please do not put multiple registrations on this form.
~Feel free to photocopy this form as needed ~

Troop #: _____ Service Unit: _____

Course Title: _____

Course Date: _____ Course Location: _____

Name: _____

Address: _____ City: _____ Zip: _____

Phone(s): _____

E-mail: _____

Volunteer Position: Leader Co-Leader Service Unit Director

Troop Organizer/Consultant Other: _____

Course Fee Enclosed (if applicable) \$ _____

Please check any special needs you have:

Speech Impairment Learning Disability Physical

Visual Impairment Hearing Other: _____

Mail Registrations to:

Girl Scouts of Southern Illinois
Att: Program/Training Registrar
4 Ginger Creek Parkway
Glen Carbon IL 62034

Make checks payable to Girl Scouts of Southern Illinois (GSSI)

Credit Card Authorization Information:

Credit Card Type: MasterCard Visa Discover

Total amount to be charged: \$ _____

Credit Card Number: _____ Exp. Date: _____

Name on Credit Card: _____

Authorized Signature: _____

This form may be faxed—mailed—or phoned in.