



GIRL SCOUTS – DAKOTA HORIZONS
PRODUCT SALES PARENT PERMISSION FORM



Dear Parent/Guardian:

Every day offers us another chance to help a girl Grow Strong--at home, at school, with her family, with her friends. What she does in Girl Scouting today – including her participation in Product Sale activities – will help her expand her horizons, help her grow, celebrate who she is so that she has the confidence to stand tall and reach high. Your role as a parent/guardian is to help your Girl Scout and her Girl Scout group realize their potential and assist in the skill building that comes through their participation in the Girl Scout Product Sales.

If you have any questions or concerns regarding any aspect of our Product Sales, please contact your Troop Leader or Membership Specialist.

THIS INFORMATION BELOW MUST BE FILLED OUT AND RETURNED TO PARTICIPATE IN COUNCIL PRODUCT SALES.

PERMISSION TO PARTICIPATE -- 2008-2009 PRODUCT SALES

AS PARENT/GUARDIAN, I AGREE TO THE FOLLOWING PARTICIPATION GUIDELINES:

- (1) My daughter (please print FIRST and LAST NAME): _____
is a member of Troop #_____.
- (2) My daughter is a 2008-2009 registered member of Girl Scouts Dakota Horizons.
- (3) My daughter has my permission to participate in the 2008 Nut Sale and the 2009 Cookie Sale.
- (4) I will accept responsibility for all nut and cookie Products ordered and remittance of Product Sale payments due.
- (5) I understand that money from Product sales is **NOT MINE** and must be turned in ON TIME to the Troop Nut or Cookie Representative.
- (6) I agree that Products will be sold only during the periods of time indicated by the Council. Early sales may make a girl or troop ineligible for troop proceeds, awards, incentives and/or Dakota Certificates.
- (8) I agree that Products will be delivered to customers and payment collected on the schedule indicated by the Council.
- (9) My daughter will use the buddy system at all times.
- (10) I agree to return damaged Product to the Troop or Program Center for replacement.
- (11) I understand that undelivered/unsold Product cannot be returned to the troop or Program Center for refund or credit.

PLEASE USE INK AND PRINT CLEARLY.

Parent/Guardian Name (Please Print): _____

Parent Signature: _____

Parent Current Address: _____ City _____ Zip _____

Parent Phone:(H) _____ (W) _____ (Cell) _____

EmailAddress: _____

THIS FORM SHOULD BE TURNED IN WITH GIRL MEMBERSHIP REGISTRATION! Thank you.