

COUNCIL-SPONSORED TRAINING SESSION REGISTRATION FORM

Complete a separate form for each session and provide all the information requested. You may duplicate this form as needed. Fax your registration to 763-535-7524, or mail to 5601 Brooklyn Boulevard, Brooklyn Center, MN 55429. For training sessions with fees, include your credit card information with your fax or include your check made out to Girl Scouts River Valleys with your US Mail payment. You may also register on the website at www.girlscoutsrv.org, using the electronic registration form with a credit card.

Name: _____ Date: _____

Address: _____ Day Phone: (____) _____

City/State/Zip: _____ Evening Phone: (____) _____

E-mail Address: _____ Cell Phone: (____) _____

Service Unit: _____ Troop #: _____

Session Title: _____

Date Begins: _____ Date Ends: _____

Location: _____ Time (Begin - End): _____

Payment (including any grant applications) must be submitted with your registration form.

Payment Information Fee per adult: \$ _____ Total Enclosed: \$ _____

- Method of Payment:**
- Check or money order payable to River Valleys: \$ _____
 - Charge my credit card: \$ _____
 - Grants for Adults Application(s): \$ _____

Credit Card Type: Visa Master Card Discover 3-digit Security Code: _____

Credit Card Number: _____ Expiration Date: _____

Cardholder's Name: _____

Cardholder's Signature _____



Girl Scouts®

Minnesota and Wisconsin
River Valleys