Girl Scout Council of the Mid-South



Girl's Record

Date form completed	
Date revised	

	(TI	nis reco	rd is kept	by the 0	Girl Scout	troop l	leade	er, assistant leader or group coo	rdinator)						
Name		ID# Date of birth: //									/				
								City							
State	Zip	o	Home Phone:												
	Change – Address City														
State _	StateZip Home Phone														
Parents/Guardians Name(s)						Phone									
		_						Phone							
Any health	condition th	at might	t limit or a	affect pa	rticipation	in Girl	Sco	ut activities:							
Registrat	1	1			1	opied fr	om th	e Troop/Group Membership Regist	ration Roste	r, form	1				
Registration date	Expiration Date (year)	New	Registratio Rereg same	n Rereg diff	Troop/ group number	Age level		School Name		Age	Date of last health exam				
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Reason for	leaving Girl	Scoutin	ng						_ Date						
	Experienc is information		d be secu	ured fron	n the girl.)			Girl Scout Service Record	i						
Year	Most of this information should be secured from the Year Name of camp					Tot day	ys	List here the service given							
						attended									

The entries for this registration record should correspond to the entries made on the Troop/Group Membership Registration Roster.

IMPORTANT: This record should be forwarded as the leadership of the troop/group changes, when the girl transfers from one troop/group to another, or to the council if the girl drops out of Girl Scouting.

^{*}Core, day or established camp

Name of gift							
Leadership Experiences Year Position Year Position							
Year	Position	Year	Position				
Girl Scout Events Attended (inter troop/group, council, national, international)			Girl Scout Trips Taken				
Year	Event	Year	Trip				
Training	g Taken						
Year	Training	Year	Training				
Achieve							
Date	Achievement	Date	Achievement				