



Pre-K Girl Scout Summer Camp

Who: All girls entering Kindergarten in the fall

When: Tuesday, June 25th through Thursday June 27th

Time: 9:30-11:30 a.m. OR 1-3 p.m.

Where: Joliet Girl Scout Gathering Place, 1551 Spencer Road, Joliet, IL

Cost: \$15.00– for all 3 days.

Make Check payable to Girl Scouts– GSGCNWI

Financial assistance is available.

R.S.V.P—Registration deadline: June 7th. Space is limited.

Please fill out and return registration form with fee to:

Girl Scouts of Greater Chicago and Northwest Indiana
ATTN: Cathy Kowalczyk
1551 Spencer Road
Joliet, IL 60433

Contact: Cathy Kowalczyk, 815-651-2733,
ckowalczyk@girlscoutsgcnwi.org

Girl Scout Promise

On my honor, I will try:
To serve God and my country,
To help people at all times,
And to live by the Girl Scout Law.

Girl Scout Law

I will do my best to be
Honest and fair,
Friendly and helpful,
Considerate and caring,
Courageous and strong,
Responsible for what I say and do,
And to
Respect myself and others,
Respect authority,
Use resources wisely,
Make the world a better place, and
Be a sister to every Girl Scout.

Please fill out this form completely and return it by June 7th.

Girl Name _____ Time Attending _____
School _____ City _____ Grade _____ Birthdate _____
Parent/Guardian Name _____ Phone # _____
Address _____
City _____ Zip _____
Email _____
In case of emergency, contact: _____ Phone # _____
My daughter has the following food allergies: _____

I give permission for my daughter to join Girl Scouts, to attend this program, to participate in all activities, to receive emergency medical treatment, if necessary I certify that my daughter is in good health and has not been recently exposed to any contagious diseases. ☐ YES ☐ NO

When participating in Girl Scout activities the registrant may be photographed for print, video or electronic imaging. The images may be used in promotional material, news releases, and other published formats for either Girl Scouts of Greater Chicago & Northwest Indiana or Girl Scouts of the USA. The images will be the sole property of Girl Scouts of Greater Chicago & Northwest Indiana or Girl Scouts of the USA.

I give permission for the registrant to be photographed, videotaped or otherwise electronically imaged ☐ YES ☐ NO

THIS VOLUNTARY INFORMATION IS USED BY GIRL SCOUTS OF THE USA TO HELP IMPROVE OUTREACH EFFORTS AND ADVANCE THE GIRL SCOUT MOVEMENT:

RACIAL BACKGROUND (Check as many as apply)

☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ White
☐ Hawaiian or Pacific Islander ☐ Other (specify) _____ ☐ I choose not to share at this time

She is Hispanic or Latina:

☐ YES ☐ NO ☐ I choose not to share at this time

Parent/Guardian signature: _____ **Date:** _____

"I would love to be an adult helper at the event!" Name of Adult helper: _____



THIS IS NOT A SCHOOL SPONSORED EVENT.