



## Troop Travel Packet

For Troop Travel experiences that only take place domestically within the jurisdiction of the United States.

Girl Scouts of Citrus Council  
341 N. Mills Ave.  
Orlando, FL 32803  
(407) 896-4475  
[www.citrus-gs.org](http://www.citrus-gs.org)





girl scouts

## Travel Progression

Progression allows girls to learn the skills they need to become competent travelers, including how to plan and organize trips. Travel fun can be endless when girls lead.



### Local Field Trips

Get your travel feet wet! Walk to a nearby garden, or take a short ride to a firehouse or other local spot.

**Keep it girl-led:** girls choose the location.

### Day Trips

Take an all-day trip!

**Keep it girl-led:** girls choose the location and activity (perhaps working toward a badge) and make plans for lunch.

### Overnights

Start with one night, maybe at a camp or museum. Progress to a weekend trip in a nearby city or state park.

**Keep it girl-led:** girls plan the activity and meals, create travel games, and pack their own overnight bags.

### Regional Trips

Spend three to four nights away somewhere a few hours from home.

**Keep it girl-led:** girls plan key details of the trip, such as the activities, the budget, the route, and lodging.

(Extended trip insurance required.)

### National Trips

Travel the country! Trips often last a week or more. Girls should think beyond a typical vacation location and consider historical sites, museums, or national parks!

**Keep it girl-led:** girls lead the entire planning process and might add a community service or Take Action project.

(Extended trip insurance required.)

### International Trips

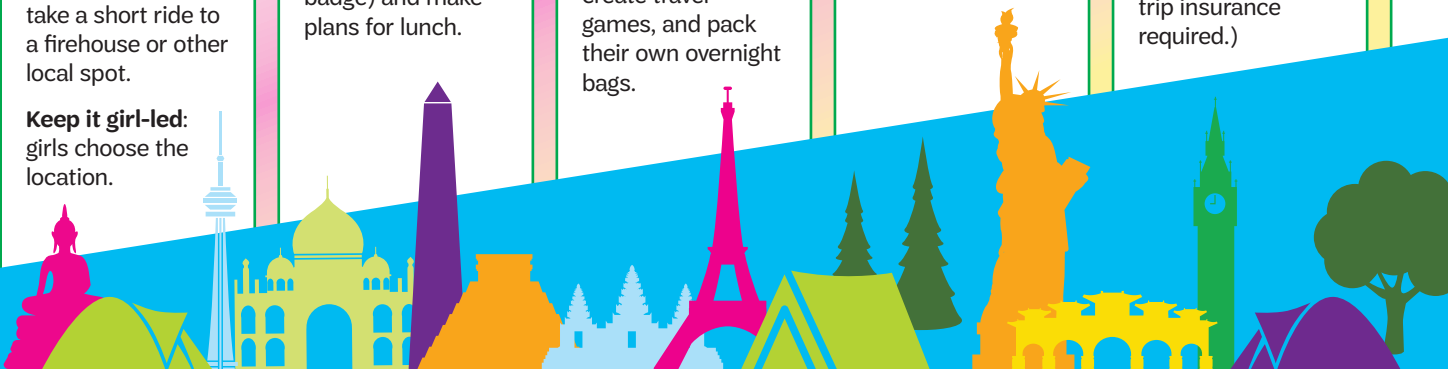
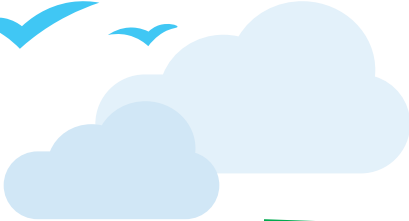


Travel the world! These life-changing trips usually take one to three years to prepare. Consider visiting a WAGGGS World Centre!

**Keep it girl-led:** girls download the Global Travel Toolkit and plan their entire trip (including learning about the language, culture, passports and visas, exchange rates, etc.).

(Extended trip insurance required.)

### Independent Travel

Cadette, Senior, and Ambassador girls with travel experience can travel nationally or internationally independently through council-offered travel opportunities or GSUSA's Destinations program. Check with your council, or visit the Girl Scout Destinations website!



Check with your council about age requirements. Girls should have experience at every level of the progression before moving on to the next level. For regional travel, girls must be Juniors or older.

For national and international trips, girls must be Cadettes or older.

When moving up to each level of the progression, consider girls' independence, flexibility, decision making, group skills, and cross cultural skills.



# Troop Travel Application

This packet is to be completed any time you are spending the night on a non GSC property. Please be sure to review all information in this packet and complete applications a minimum of **60 days** prior to trip or activity. Once it is received you will be notified within **10 business days** of the status of your request and if there are any concerns. The completed Packet must be submitted with all the forms, attachments, and insurance request if the trip/activity requires it. Please refer to the Activity/Travel Checklist for clarification. Always wait for approval before moving forward with the girls for planning. Please submit all forms to Customer Care, attention Michelle Rouleau – Sr. Manager of Outdoor Adventure and Travel at [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org).

## General Information

Troop # \_\_\_\_\_ Service Community \_\_\_\_\_ Program Level \_\_\_\_\_

Troop Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Travel Destination: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Return Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Is the trip 2-nights/3 days or less \_\_\_\_\_ or is this an Extended Trip 3 – nights or more \_\_\_\_\_

Female Adults: \_\_\_\_\_ Male Adults: \_\_\_\_\_ DY: \_\_\_\_\_ BR: \_\_\_\_\_ JR: \_\_\_\_\_ CD: \_\_\_\_\_ SR: \_\_\_\_\_ AB: \_\_\_\_\_

What is the purpose of this trip (i.e. Troop trip, Service, etc.)? \_\_\_\_\_

Estimated cost per girl: \$ \_\_\_\_\_ Estimated cost per adult: \$ \_\_\_\_\_ Total Budget: \$ \_\_\_\_\_

Does your group plan on participating in council-sponsored product sales? Yes \_\_\_\_\_ No \_\_\_\_\_

Does your group plan on conducting any money-earning activities? Yes \_\_\_\_\_ No \_\_\_\_\_

## Transportation

Type of Vehicle: \_\_\_\_\_ (Remember that 15 passenger vans are not permitted)

If using private or leased vehicles you must list adults below (if applicable, list additional driver(s) information on a separate sheet):

Name: \_\_\_\_\_ D.L.# \_\_\_\_\_ Ins Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

Name: \_\_\_\_\_ D.L.# \_\_\_\_\_ Ins Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

Name: \_\_\_\_\_ D.L.# \_\_\_\_\_ Ins Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

Name: \_\_\_\_\_ D.L.# \_\_\_\_\_ Ins Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

If using a transportation company or renting vehicles, list name of company and attach contract:

\_\_\_\_\_

If using a tour company list name and attach their itinerary: \_\_\_\_\_

Please submit all forms to Customer Care attention  
Michelle Rouleau - Senior Manager of Outdoor Adventure and Travel  
at: [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org)

## Troop Travel Application

### Travel Route

Please be sure to include a copy of your travel route (copy of google maps) along with designated stops and or breaks.

**Travel Restrictions** – No travel is permitted to locations if there is a Level 4 Travel Advisory, those locations that have a Level 3 are advised to reconsider travel.

### Activities

Are there any high-risk activities on this trip? Yes \_\_\_\_ No \_\_\_\_ Type of activities: \_\_\_\_\_

Are they on the GSC approved vendor list? Yes \_\_\_\_ No \_\_\_\_ If not please list below:

Vendor Name: \_\_\_\_\_ Vendor Phone: \_\_\_\_\_

Vendor address: \_\_\_\_\_ Vendor Website: \_\_\_\_\_

All high-risk activities must be approved. As the responsible adult for this group, I have verified all safety guidelines in Safety Activity Checkpoints and verified the vendor carries a 1-million-dollar liability policy. Please be sure to include with this packet all information

### Itinerary for Trip

Date & Times	Name & Address of Location	Type of Activity

Please submit all forms to Customer Care attention  
Michelle Rouleau - Senior Manager of Outdoor Adventure and Travel  
at: [customer-care@citrus-gs.org](mailto:customer-care@citrus-gs.org)

## Troop Travel Application

### Statement of Compliance:

As the designated leader /responsible adult for this trip, I agree to the following:

- I have reviewed and will be adhering to the following guidelines: Safety Activity Checkpoints, Volunteer Essentials GSUSA and Girl Scouts of Citrus Council (GSC) health, safety, and emergency procedures.
- I have reviewed the current COVID information found on both the GSC and CDC websites and understand that it is my responsibility to make sure all guidelines are being followed at all locations, activities, and stops. This includes checking all travel restrictions and advisories.
- I understand that COVID-19 is an extremely contagious virus that spreads easily in the community. I have discussed with each troop/family that they should weigh their participation based on their own, as well as their family members health concerns. As with any social activity, participation in Girl Scouts could present the risk of contracting COVID-19. While Girl Scouts of Citrus takes every safety and preventative precaution, I understand that Girl Scouts of Citrus can in no way warrant or be held responsible that COVID-19 infection will not occur through participation in Girl Scout activities.
- Every driver must be a registered, background-checked member (approved volunteer) at least 21 years old, and have a good driving record, (more specific, without not driving restrictions) a valid license, and a registered/insured vehicle.
- If a group is traveling in one vehicle, there must be at least two unrelated, registered background checked members (approved adult volunteers) in the vehicle, one of whom is female.
- If a group is traveling in more than one vehicle, the entire group must consist of at least two unrelated, registered background checked members (approved adult volunteers), one of whom is female
- Ensure there are breaks built into the schedule, to allow time for drivers to rest. If a trip is longer than 6 hours, be sure to have relieve drivers for each vehicle.
- All vehicles are currently registered, insured, have had recent maintenance inspection and have a seat and seatbelt for every passenger.
- Vehicle checklist has been completed on each day of travel.
- Parents/guardians are informed of the trip activities, safety procedures, and contact information.
- I understand that by providing incorrect or participating in an activity that is not approved could result in the trip not being covered by Girl Scout Activity Insurance and could increase personal liability.
- Appropriate permissions have been obtained for each girl including Health History/Health Exam, waivers, and permission slips.
- Our group/troop will conduct ourselves at all times in a positive manner while representing Girl Scouts.
- All adults and girls have completed and submitted behavioral/photo agreements
- Each vehicle will have trip binders – all pertinent information for everyone and a first aid kit
- I have read and discussed the Safety Checklist with all adults and Girl Scouts on this trip.

Designated Leader/Responsible Adult:

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **For Girl Scouts of Citrus Council Staff Only**

Date Received: \_\_\_\_\_ Approved: Yes \_\_\_ No: \_\_\_\_\_

If not approved, reason and actions that need to be taken:

\_\_\_\_\_

Council Approval (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Please submit all forms to Customer Care attention  
Michelle Rouleau - Senior Manager of Outdoor Adventure and Travel  
at: [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org)



## Acknowledgement of Covid-19 Guidelines

This form is to be used when participating in any Girl Scout activities, meetings, trips etc. that take place for any Girl Scout activity with girls and/or adults.

**Please note:** for troop meetings this form only needs to be submitted once per membership year unless there is a location change.

Volunteer: \_\_\_\_\_

Email: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Troop #'s for all troops you lead : \_\_\_\_\_

Community Name: \_\_\_\_\_

For troop meetings (only 1 per year) \_\_\_\_ or For any activity (each time) \_\_\_\_

Troop meeting/activity address: \_\_\_\_\_

Please acknowledge that you understand each of the statements below:

COVID-19 is an extremely contagious virus that spreads easily in the community. Each troop/family should weigh their participation based on their own as well as their family members health concerns. As with any social activity, participation in Girl Scouts could present the risk of contracting COVID-19. While Girl Scouts of Citrus takes every safety and preventative precaution, Girl Scouts of Citrus can in no way warrant or be held responsible that COVID-19 infection will not occur through participation in Girl Scout activities. \_\_\_\_ Initial

I have read the current guidelines for resuming in-person activities from Girl Scouts of Citrus Council and I will take all reasonable precautions to limit exposure for girls, volunteers, and families, which will include following CDC, GSUSA, GSC and state health department guidelines. \_\_\_\_ Initial

I will be sure to inform girls, volunteers, and families what measures have been put in place during our time together such as wiping down and disinfecting all high touch areas before, during and after activity. Wiping down supplies and other items and areas, spraying a disinfectant, the proper way to wash hands including how to shut off faucets, open doors, etc., using hand sanitizer, wearing masks, social distancing, and any other safety protocol including pre-screening forms and temperature checks. \_\_\_\_ Initial

For any allowed in-person troop activities, including meetings the adult volunteers are responsible for assisting with and monitoring all social distancing guidelines and cleaning protocols. \_\_\_\_ Initial

In the event of a positive COVID-19 test result within my troop, I will notify the parents/caregivers and others who may have been exposed. I understand girl and volunteer health information is confidential and I am not to share that with anyone outside of those exposed. \_\_\_\_ Initial

Volunteer Name Printed/Typed : \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Participant Roster for All Activities

(Roster must be submitted with each Activity Request Form)

Troop Meeting \_\_\_ Event/Activity \_\_\_ Name of Event/Activity \_\_\_\_\_ Date: \_\_\_\_\_

**Please Note:** All Adult Participants must be registered members and approved volunteers. Please list all girls and adults below and complete all the information including: your designated First Aider, Outdoor Skills and/or any other trained volunteers that are attending. (Be sure to include their certifications when you submit this paperwork) Review Safety Activity Checkpoints for all guidelines

Participant's Name	Adult or Girl	DOB	Participant Contact Phone (Cell)	Emergency Contact Name	Relationship to participant	Emergency Contact Phone (cell)	Certifications FA/CPR, Outdoor, Lifeguard, etc.	Certification Expiration Date (if applicable)	Background Check Expiration Date



# Safety Checklist for all Drivers and Vehicles

Troop Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Troop # \_\_\_\_\_ Service Community \_\_\_\_\_ Program Level \_\_\_\_\_

Travel Destination: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Return Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Female Adults: \_\_\_\_\_ Male Adults: \_\_\_\_\_ DY: \_\_\_\_\_ BR: \_\_\_\_\_ JR: \_\_\_\_\_ CD: \_\_\_\_\_ SR: \_\_\_\_\_ AB: \_\_\_\_\_

Type of vehicles: \_\_\_\_\_ License Plate #'s \_\_\_\_\_

**When driving a car, RV, or camper, take the following precautions and ask all other drivers to do the same:**

- Every driver must have a current GSUSA registration, approved background checked, be at least 21 years old, and have a safe driving record, (more specific, without not driving restrictions) a valid license, current insurance, and a registered vehicle.
- Girls/minors are never drive other girls during activities or field trips, including golf carts .(If the member has a girl membership, she is considered a girl/minor)
- Review Safety Activity Checkpoints and Volunteer Essentials for all guidelines for driving
- Never transport girls in flatbed or panel trucks, in the bed of a pickup, or in a camper-trailer.
- Keep directions and a road map in the car, along with a first-aid kit and a flashlight.
- Complete Daily Vehicle Checklist
- Keep all necessary papers up to date including, but not limited to your driver's license; vehicle registration; any state or local inspections; and insurance coverage.
- Wear seat belts and insist that all passengers do the same. Each person must have their own, fixed seatbelt.
- Girls under 12 must ride in the back seats. Use car seats and boosters as required in your state.
- Drivers are not to drive more than 6 hours, set up relief drivers or stop for the night.
- Be sure to have designated stops along the way for travel
- Keep at least a two-car-length distance between you and the car ahead of you.
- Do not talk or text on a cell phone or other device.
- Do not use ear buds or headphones.
- Turn your lights on when your windshield wipers are on
  - Know what to do in case of breakdown or accident. It is smart to have reflectors, a flashlight, a few tools, and a good spare tire.
  - Take time to familiarize yourself with any new or rented vehicle.
  - Take a break when you need it. The volunteer in charge of your trip will plan occasional stops, but it is ok to pull over to a safe place whenever you are too tired to continue. Relief drivers are planned for long drives.
- Do NOT drive when you are tired or taking medication that makes you drowsy. Check with your council for any other specific guidelines or requirements they have.

**Designated Leader/Responsible Adult**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit all forms to Customer Care attention  
Michelle Rouleau - Senior Manager of Outdoor Adventure and Travel  
at: [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org)





## Daily Vehicle Checklist

**Reminder:** Be sure to print multiple copies of this form and complete every day while on the trip. Once trip is complete be sure to keep with troop paperwork for one year.

Type of Car: \_\_\_\_\_ Plate #: \_\_\_\_\_ Date: \_\_\_\_\_

Personal Vehicle: \_\_\_\_\_ Rental Vehicle: \_\_\_\_\_ Council Vehicle: \_\_\_\_\_

Check the following items:	Pass/Fail – Action Taken	Initial
➤ Look at tires and check pressure in all tires		
➤ Brake Check		
➤ Check all lights on dashboard		
➤ Windshield Wipers		
➤ Signal Lights		
➤ Lights		
• Brake		
• High Beams		
• Interior		
• Night Lights		
➤ Horn		
➤ Walk around vehicle for any damage		
➤ Fluids (only need to check before leaving each way)		
• Oil		
• Radiator Fluid		
• Brake Fluid		
• Wiper Fluid		

**Designated Leader/Responsible Adult:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Medication and Treatment Log

Event Name: \_\_\_\_\_ Event Location: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Designated Medical Person: \_\_\_\_\_

	Name	Adult or Minor	Type of Health Issue or Injury	Treatment or Medication and Dosage	Additional Comments, Were Parents Contacted	Medical Person Initials	Time of Treatment or Medication
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

## **General Information for Troop Travel**

Each troop/family should weigh their participation based on their own health concerns. As with any social activity, participation in Girl Scouts could present the risk of contracting COVID-19. While Girl Scouts of Citrus takes every safety and preventative precaution, Girl Scouts of Citrus can in no way warrant that COVID-19 infection will not occur through participation in Girl Scout activities.

Please be sure to follow the guidelines listed below when submitting paperwork, ensuring that all information is complete and provided at the time of submission will allow for a timely turnaround.

Girl Scouts of Citrus Council wants to ensure the safety of our girls, volunteers, and staff always. By following Safety Activity Checkpoints, Volunteers Essentials, and Risk Management guidelines for all events, activities, travel, and high adventure opportunities this will ensure the safety of everyone involved.

Please submit this paperwork to Customer Care attention Michelle Rouleau - Sr. Manager - Outdoor Adventure and Travel at [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org)

### **General Troop Travel**

When girls are looking to plan a trip for any length of time, there are always multiple factors to look at during the planning stage, such as:

- ✓ Location
- ✓ Length of trip
- ✓ Grade level of girls to ensure travel progression is being incorporated
- ✓ All health and safety guidelines
- ✓ Any excursions that the girls would like to participate in
  - o This would include any high adventure activities they may need to be reviewed and approved

### **Extended Troop Travel for more than 3 days/2 nights**

- Current trips are being approved for all location that are at a travel advisory of a Level 3 or lower.
- All current Safety Activity Checkpoint, Volunteer Essential and COVID – 19 guidelines are followed
- Updated Activity Packet is completed and submitted 2 months before trip to Customer Care.
- High Adventure activities need to be reviewed and vetted.
- Troops must have a current Troop First Aider and Troop Camper (if applicable) for the type of overnight activity
- All girls attending the trip must have a current membership
- All adults attending and/or driving must have a current membership and an approved CBC. All drivers must have a current driver's license and insurance.

### **Which activities require approval?**

All high risk/adventure activities need prior approval from council. High risk is defined as: any activity that requires specialized skills, training, equipment and/or supervision on the part of the participant, instructor and/or the vendor. Examples of these include but are not limited to: Horseback riding, rock climbing, low & high ropes, climbing walls, canoe/kayak, paddleboard, surfing, indoor trampoline, indoor skydiving or shooting sports or locations and/or sites that provide these types of activities

### **Which activities do not require approval?**

In general, the following activities do not require approval: family fun centers, ice/roller skating, bounce houses and age-appropriate arts and crafts. Remember to refer to Safety Activity Checkpoints for all activities to review complete guidelines for the activity such as safety and grade/age requirements. Contact the facility prior to the activity for any site-specific guidelines and requirements such as: waivers, weight & height restrictions, etc.

\*Please note:

If a venue has multiple activities, some of them may require approval and some may not, be sure to verify prior to participation.

For all questions regarding High Adventure Activities, Safety Guidelines or Vendor Approval please email Michelle Rouleau, Sr Manager of Outdoor Adventure and Travel at [mrouleau@citrus-gs.org](mailto:mrouleau@citrus-gs.org)

## **Insurance Information and Forms**

- ✓ General Insurance Information
- ✓ How to purchase additional insurance
- ✓ How to submit an insurance claim in case of accident/injury
- ✓ Insurance Comparison Chart
- ✓ Forms
  - Plan 2
  - Plan 3E
  - Plan 3P
  - Plan 3PI

For questions regarding Insurance and Purchasing Guidelines please contact Customer Care at [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org) or 407-896-4475

## **General Insurance Information**

When ordering insurance be sure to review the types of plans and when they are required. Refer to the Insurance Comparison Chart and the Activity/Travel Checklist for clarification

- ✓ Keep in mind that all currently registered members have Plan 1 Basic Accident Insurance and are covered for all events, activities and trips that are 3 days/2 nights or less.
- ✓ Additional Insurance plans must be purchased when the event, activity or trip is more than 3 days/2 nights and if there are any non- members present.
- ✓ Additional insurance plans MUST be purchased 4 weeks in advance of the activity and 8 weeks for out-of-state or out-of-country travel.
- ✓ Only the Troop Leader or other registered adult in charge may order insurance.
- ✓ Requests for insurance must come directly to the Council Service Center with the completed High Adventure/Trip Travel packet. Requests are not allowed to be submitted directly to Mutual of Omaha. The appropriate form must be completed and submitted (with payment by check, money order or credit card) to the Council Service Center for approval (see Steps for Purchasing Insurance).
- ✓ There is a \$5 minimum charge for all insurance requests.

Always keep in mind that Additional Insurance is secondary insurance. The insured party's family insurance plan is primary. Mutual of Omaha pays the first \$140 of an approved claim and will continue (after the family insurance plan has reached its coverage limit) up to a total of \$20,000 for each claim.

### **How to Purchase Additional Insurance:**

- ✓ Review the Girl Scout Insurance Comparison Chart and Activity/Travel Checklist to determine which plan(s) you will need to purchase.
- ✓ Choose the plan you need (Plan 2, Plan 3E, Plan 3P, and Plan 3PI).
- ✓ Complete the most current Enrollment Forms (type or print legibly) which can be found on the website under forms at [www.citrus-gs.org](http://www.citrus-gs.org) .
- ✓ Be sure that the top of the form is completed with all the leader/responsible adult's information
- ✓ Include the name of the event and the city in the "Name/Location of Event" column.
- ✓ Total ALL columns (use dollar signs on all money amounts).
- ✓ Do NOT date enrollment forms (council will sign and date after verification).
- ✓ Include your payment with all of your paperwork If you are submitting a check or Money Order make them payable to Girl Scouts of Citrus Council. DO NOT SEND CASH.
- ✓ Please Note: The minimum purchase for insurance is \$5.00. Therefore, if the total cost of your insurance is under \$5.00, you will still need to pay a minimum of \$5.00.

Submit your completed Packet to Customer Care attention: Michelle Rouleau, Sr. Manager of Outdoor Adventure and Travel at [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org)

Once the activity/travel is approved the paperwork will be forwarded to Business Services to purchase the requested insurance.

All forms and payment must be in the council office at least 4 to 8 weeks in advance of the event or trip. Please Note: If a form is incomplete or inaccurate, or if the payment is in the wrong amount or under \$5.00, they will not be processed.

For more information or questions regarding insurance please contact: Customer Care at [customercare@citrus-gs.org](mailto:customercare@citrus-gs.org) or 407-896-4475

## **Instructions for Submitting an Insurance Claims (All Plans)**

As with ordering insurance, all claims need to be submitted to the Council first and then the Council will submit the completed paperwork to Mutual of Omaha. Only authorized staff is allowed to submit paperwork to them.

Steps for Filing a Claim:

1. Print out the claim form. Go to the Mutual of Omaha website:  
[www.mutualofomaha.com/gsus](http://www.mutualofomaha.com/gsus)
2. Click on "How to file a Claim and Claim Forms"
3. Scroll down the page and click on "Claim Forms" (Print out all 3 pages and staple together)
4. Complete the form in full and sign wherever appropriate. Do not complete the very bottom section (for council use only)
5. Send the claim form to the Council Service Center, attention: Marie Snead, for validation, along with any bills received at the time.

Girl Scouts of Citrus Council  
341 N Mills Ave  
Orlando, FL 32803  
Attention: Marie Snead

Council will complete the council section, sign and mail to the insurance company.

Please remember to send the accident report and any subsequent bills related to this claim to [customercare@citrusgs.org](mailto:customercare@citrusgs.org) attention Business Services at the council office. If you prefer to receive hard copies of claim forms, please contact Marie Snead (407) 228-1616 or [msnead@citrusgs.org](mailto:msnead@citrusgs.org).

## Girl Scout Insurance Plan - Comparison Chart

<p><b>PLAN 1 Accident Insurance</b> (Included in current GSUSA memberships)</p>	<p><b>Plan 1 Accident Insurance</b> is included in all currently registered GSUSA members. This is for all Girl Scout events inside/outside Council Jurisdiction within the United States that are 2 nights or less.</p> <p>This insurance does not cover trips longer than 2 nights, trips outside of U.S. territory; or for non-members and tag-a-longs.</p> <p>This plan covers accident-related injury only, not sickness or infirmity.</p>
<p><b>PLAN 2 Accident Insurance</b> (\$.11 per person, per calendar day)</p>	<p><b>Plan 2 Accident Insurance</b> should be purchased for participants who are NOT currently registered GSUSA members for all events that are inside/outside Council Jurisdiction for any time frame.</p> <p>It should also be purchased for all registered members that are participating in an event that is 3 nights or more.</p> <p>Example: If your troop is planning a trip for 5 days and 4 nights, you will need to purchase insurance for all of the registered members for the full 5 days because the trip is longer than 3 days, 2 nights.</p> <p>This plan covers accident-related injury only, not sickness or infirmity.</p> <p>Plan 2 does not cover any trips/activities outside of the United States.</p>
<p><b>PLAN 3E Accident and Sickness Insurance</b> (\$.29 per person, per calendar day)</p>	<p><b>Plan 3E Accident &amp; Sickness</b> is recommended to be purchased for trips out of state or for any other trip that is 3 nights or more, where sickness could occur, or when council wishes to provide this extra sickness coverage which is not covered under Plan 2, such as extended trips out of town.</p> <p>This plan covers accident-related injuries and sickness.</p>
<p><b>PLAN 3P Accident and Sickness Insurance</b> (\$.70 per person, per calendar day)</p>	<p><b>Plan 3P Accident &amp; Sickness</b> For groups with one or more participants who do not have personal family insurance (or where personal insurance may not be honored). For events and trips that are 3 nights or more. Plan 3P acts as primary insurance for participants covered by the plan.</p>
<p><b>PLAN 3PI Accident and Sickness Insurance for International Trips</b> (\$1.17 per person, per calendar day)</p>	<p><b>Plan 3P1 Accident &amp; Sickness</b> For any Girl Scout group planning a trip out of the country for 3 nights or more. Due to certain pre-trip benefits, this insurance should be purchased in the planning stages of the trip, but after the trip has been approved by the council, Call the council office to obtain detailed information on how to purchase this plan.</p>
<p><b>INTERNATIONAL INBOUND Accident and Sickness Insurance for Girl Guides/Girl Scouts Visiting the USA</b> (\$3.30 per person, per calendar day)</p>	<p>Can be purchased by groups who are hosting Girl Guides/Girl Scouts visiting the USA. This insurance covers the visiting Girl Guides/Girl Scouts.</p>





## Plan 2 Enrollment Form

1. Always review the insurance Comparison Chart to be sure you are purchasing the correct insurance.
2. Submit the completed form with payment to Girl Scouts of Citrus Council for processing and approval.
3. Be sure to include approved TAR, Travel or Event paperwork together.
4. Your insurance information will be sent to the email listed below.
5. Council approval is required to process insurance, without the appropriate Council authorization requests cannot be processed; volunteers cannot submit enrollments or payments directly to Mutual of Omaha Companies

\_\_\_\_\_  
 Name (Leader or person submitting this form)      Troop #      Community

\_\_\_\_\_  
 Street      City      State      Zip

\_\_\_\_\_  
 Phone #      E-mail

Please provide the selected Accident and Sickness Insurance to cover all enrolled participants in the following approved activities (except statutory employees covered under workers' compensation.)

### List the Event Information Below

Name and Address of Event	Beginning Date	Ending Date	(1) Number of Participants	(2) Number of Days	(3) Participant x Days	(4) Premium per day	Total Due (3 x 4)
Example: Medieval Times, 4510 W Vine St, Kissimmee, FL 34746	10/31/19	10/31/19	55	1	55	.11	\$6.05

**MINIMUM PREMIUM is \$5.00 – several events can be included in one submission to be combined to meet the minimum.**

Method of payment:  Check  Money Order  VISA  MASTERCARD  DISCOVER

If paying by credit card, information below **MUST BE INCLUDED:**

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_/\_\_\_\_ Sec. Code \_\_\_\_\_  
 (Fill in all digits shown on your credit card)      M M Y Y

Name as it appears on Credit Card: (Print) \_\_\_\_\_

Signature (required on credit card orders) \_\_\_\_\_

COUNCIL USE ONLY: Budget Code: \_\_\_\_\_



## Plan 3 E Enrollment Form

1. Always review the insurance Comparison Chart to be sure you are purchasing the correct insurance.
2. Submit the completed form with payment to Girl Scouts of Citrus Council for processing and approval.
3. Be sure to include approved TAR, Travel or Event paperwork together.
4. Your insurance information will be sent to the email listed below.
5. Council approval is required to process insurance, without the appropriate Council authorization requests cannot be processed; volunteers cannot submit enrollments or payments directly to Mutual of Omaha Companies

\_\_\_\_\_  
 Name (Leader or person submitting this form)      Troop #      Community

\_\_\_\_\_  
 Street      City      State      Zip

\_\_\_\_\_  
 Phone #      E-mail

Please provide the selected Accident and Sickness Insurance to cover all enrolled participants in the following approved activities (except statutory employees covered under workers' compensation.)

### List the Event Information Below

Name and Address of Event	Beginning Date	Ending Date	(1) Number of Participants	(2) Number of Days	(3) Participant x Days	(4) Premium per day	Total Due (3 x 4)
Ex: Savannah Trip - Holiday Inn, 520 W Bryan St, Savannah, GA 31401	10/1/19	10/5/19	12	5	60	.29	\$7.20

**MINIMUM PREMIUM is \$5.00 – several events can be included in one submission to be combined to meet the minimum.**

Method of payment:  Check  Money Order  VISA  MASTERCARD  DISCOVER

If paying by credit card, information below **MUST BE INCLUDED:**

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_/\_\_\_\_ Sec. Code \_\_\_\_\_  
 (Fill in all digits shown on your credit card)      M M Y Y

Name as it appears on Credit Card: (Print) \_\_\_\_\_

Signature (required on credit card orders) \_\_\_\_\_

**COUNCIL USE ONLY: Budget Code:** \_\_\_\_\_



## Plan 3 P Enrollment Form

1. Always review the insurance Comparison Chart to be sure you are purchasing the correct insurance.
2. Submit the completed form with payment to Girl Scouts of Citrus Council for processing and approval.
3. Be sure to include approved TAR, Travel or Event paperwork together.
4. Your insurance information will be sent to the email listed below.
5. Council approval is required to process insurance, without the appropriate Council authorization requests cannot be processed; volunteers cannot submit enrollments or payments directly to Mutual of Omaha Companies

\_\_\_\_\_  
 Name (Leader or person submitting this form)      Troop #      Community

\_\_\_\_\_  
 Street      City      State      Zip

\_\_\_\_\_  
 Phone #      E-mail

Please provide the selected Accident and Sickness Insurance to cover all enrolled participants in the following approved activities (except statutory employees covered under workers' compensation.)

List the Event Information Below

Name and Address of Event	Beginning Date	Ending Date	(1) Number of Participants	(2) Number of Days	(3) Participant x Days	(4) Premium per day	Total Due (3 x 4)
Ex: Savannah Trip - Holiday Inn, 520 W Bryan St, Savannah, GA 31401	10/1/19	10/5/19	12	5	60	.70	\$42.00

**MINIMUM PREMIUM is \$5.00 – several events can be included in one submission to be combined to meet the minimum.**

Method of payment:  Check  Money Order  VISA  MASTERCARD  DISCOVER

If paying by credit card, information below **MUST BE INCLUDED:**

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_/\_\_\_\_ Sec. Code \_\_\_\_\_  
 (Fill in all digits shown on your credit card)      M M Y Y

Name as it appears on Credit Card: (Print) \_\_\_\_\_

Signature (required on credit card orders) \_\_\_\_\_

Council Use Only –Budget Code: \_\_\_\_\_



## Plan 3 PI Enrollment Form

1. Always review the insurance Comparison Chart to be sure you are purchasing the correct insurance.
2. Submit the completed form with payment to Girl Scouts of Citrus Council for processing and approval.
3. Be sure to include approved TAR, Travel or Event paperwork together.
4. Your insurance information will be sent to the email listed below.
5. Council approval is required to process insurance, without the appropriate Council authorization requests cannot be processed; volunteers cannot submit enrollments or payments directly to Mutual of Omaha Companies

\_\_\_\_\_  
 Name (Leader or person submitting this form)                      Troop #                      Community

\_\_\_\_\_  
 Street                      City                      State                      Zip

\_\_\_\_\_  
 Phone #                      E-mail

Please provide the selected Accident and Sickness Insurance to cover all enrolled participants in the following approved activities (except statutory employees covered under workers' compensation.)

### List the Event Information Below

Name and Address of Event	Beginning Date	Ending Date	(1) Number of Participants	(2) Number of Days	(3) Participant x Days	(4) Premium per day	Total Due (3 x 4)
Ex: Our Chalet - Hohliebeweg 1, 3715 Adelboden, Switzerland	10/1/19	10/10/19	12	10	120	\$1.17	\$140.40

**MINIMUM PREMIUM is \$5.00 – several events can be included in one submission to be combined to meet the minimum.**

Method of payment:  Check  Money Order  VISA  MASTERCARD  DISCOVER

If paying by credit card, information below **MUST BE INCLUDED**:

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_/\_\_\_\_ Sec. Code -----  
 (Fill in all digits shown on your credit card)                      M M Y Y

Name as it appears on Credit Card: (Print) \_\_\_\_\_

Signature (required on credit card orders) \_\_\_\_\_

Council Use Only – Budget Code: \_\_\_\_\_