Girl Scouts of Utah



2019 FALL PRODUCT AND 2020 COOKIE PROGRAMS

Parent/Guardian Permission & Responsibility Agreement

445 East 4500 South, #125 Salt Lake City	, UT T (801)265-8472 www.gsutah.org
all rules and procedures as set by Girl Scouts of Utah (GSU times and I will adhere to the published starting dates for	m and 2020 Cookie Program. I will see that she honors any and J). I will see that she has adult supervision and guidance at all order taking. I will follow the GSU Product Sale Policies and
Standards.	
3) I understand that the 2019 Fall Product Program and and that "the income from product sales does not be	ct received and monies collected as payment from customers. 2020 Cookie Program proceeds are Troop & Council property come the property of individual girl members" Girl Scout's Troop by the Council-set deadlines or any earned
	prior to the expiration of ticketed or time-sensitive recognition
items, GSU will not be obligated to reissue, replace, substitute, or refund the value of said recognitions. 6) GSU reserves the right to seek the services of a collection agency and/or pursue legal action for delinquent accounts. I agree to pay all costs of collection including an additional fee of 35%. I further agree to pay all court costs and attorney's fees should legal action become necessary.	
7) Any Girl Scout found to be selling before the official s	tart dates, or through prohibited methods, will not receive
family and only when the users profile is set to privat	es links may only be shared via social media with friends and e. Girl contact information, online sales links, or sales c-facing online sites (Facebook, Instagram. Neighborhood) nor
My daughter will be participating in the: 2019 F	all Product Program 2020 Cookie Program
My daughter has my permission to engage in online Fall activities under the supervision of myself and/or the Gir	
My daughter has my permission to sell cookies at a cook	kie booth with her troop: Yes No
I am available to help at the troop cookie booths:	res No
Please turn this complete	d form in to your Troop Leader
Parent/Guardian Name (print)	Email Address (print)
Home Address	City, Zip
Home Phone	Cell Phone
Signature	Date
Pov. 4/10/10	