2024 Troop Product Manager Cookie Program Agreement Form

Volunteer Responsibilities: Organize, coordinate, direct and manage the Cookie Program at the troop level; provide girls with the opportunity to learn life skills and earn funds for the troop by facilitating participation in the product program(s).

Are you a registered adult for the 2023-2024 Girl Scout year? ____Yes ____No

First and Last Name

Service Unit Name

Troop Number

Street Address

City, State, Zip Code

Best Phone Number for Communication

Does this number accept text messages?

___Yes ___No

Email Address

By submitting this form, I agree to the following:

____ In the event I am no longer able to fulfill the TPM duties, I will immediately notify Girl Scouts of Utah (GSU). I will return all records pertaining to this year's product programs and all products not signed for by caregivers to GSU's Product Program Department. I understand that I am financially responsible for all this season's product until I have turned over all documents and product to GSU; all finances must be accounted for before being released from TPM role.

____ I have read and will comply with all Cookie Program requirements stated in GSU's "Volunteer Essentials" and "Safety Activity Checkpoints".

____ I will complete all required trainings, observe all deadlines, and follow all procedures as directed by GSU.

____ I will obtain a signed Caregiver Permission Agreement form for each participating Girl Scout prior to distributing order cards, materials, or product.

____ I will provide Product Program training for Girl Scouts and their families, including GSUSA safety and social media guidelines & GSU procedures.

____ I will collect all Girl Scout order forms within my troop; I will also review and enter troop orders into Smart Cookies by the stated deadline: February 6, 2024.

____ I will take responsibility for all products handled, arrange for pick-up of product from service unit delivery site, and coordinate the distribution of products to my troop.

By submitting this form, I agree to the following financial stipulations:

____ I will fill out a receipt for all product, rewards, and money; I will ensure that every receipt is completely filled out and signed. I will give a copy to the caregiver and retain a copy for my records.
___ I will take responsibility for all products handled. I will keep product away from direct sun, excessive heat, rain, snow, pests, or pets.

_____ I will ensure that all funds, including troop proceeds, are deposited into our troop bank account by the deadlines issued by GSU. 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.

_____ At GSU's discretion, funds will be removed from troop accounts for the initial order cookie payment beginning on March 21, 2024, with the amount being \$1.00 per package minus digital cookie payments. _____ I will ensure that sufficient funds will be in the troop account for the final council ACH debit no later than April 8, 2024. GSU will repeat an ACH that fails for any reason.

I agree to act as the Troop Product Manager in the 2024 Cookie Program.

- I understand I am financially responsible for any stolen, damaged, or lost product, money, or rewards while in my possession.
- I understand that GSU has the right to make ACH withdrawals from troop accounts.
- I understand that all product program proceeds are troop and council property and should not be retained by individual Girl Scouts, their families or myself as personal property. I also understand that any misuse or failure to appropriately deposit these funds on my part may result in legal action taken against me by the Girls Scouts of Utah.
- I understand GSU will share my contact information with my SUPPR, Troop Leader and Girl Scouts/parents in my troop. I also understand GSU is releasing restricted data to me for my use in my Girl Scout volunteer capacity. Any unauthorized disclosure/distribution of such data, including but not limited to addresses, phone numbers, email, etc. for any reason other than Girl Scout business is prohibited. The violation of disclosing any such GSU data may result in the termination of my volunteer service for GSU.
- All the information I have provided is true. I understand that falsification or significant omissions of information may be considered reason for dismissal.

Printed Full Legal Name

Signature

Date