

Cascade Challenge 2018 Registration

<u>Who</u> : GSWW Council Girl Scouts: Cadette (Gr.6-8) & S a troop, form a multi-troop group, or as an Independent with an available troop OR may form their own group or, <u>Min/Max participants</u> : Min: 8 Troops or 50 Scouts	enior/Ambassador Girl So Registered Member (IRI , ahead of time. Ma requests will have an addi Final payment: Registration Closes: Ma ouncils and for additional	M). IRMs will need to be placed ax: 24 troops or 200 Scouts tional \$1.00 per person cost. Postmarked by 3/31/2018 arch 31, 2018 or when filled
Web: www.gscascadechallenge.com Sponsored by GSWW-SU 245 Lynnwood For more info Cont Ellen Govan at (425) 776-7730 or by email: gscascadechalleng		0
 Adults: Minimum & maximum are two per troop/grou Limited to no more than two groups from the same tro All participants must be registered Girl Scouts and the One registration form is required per troop/group/IRM Mail this form to: Karin Cook, Cascade Challenge Re Checks payable to GSWW-SU 245 Cascade Challeng Registration will be acknowledged by email from the named below and will include the Challenge Troop P. Cancellations received after March 1, 2018 will forfei If the balance is not paid by the final payment due dat non-refundable. Wait list participants will be refunded The Leader's Challenge begins with the thorough an Those troops requesting medically necessary gluten fr 	pop; each group with a mining adults must meet GSWW to adults must meet GSWW to and is only accepted by magistrar: 17102 Ashworth Average. The Challenge Committee everage reparation packet. The their deposit. The the registration becomes care all money after event takes all degible completion of this gee food will be provided GF	num of 6 Scouts. roop camp training requirements. ail with the \$75 deposit. re North: Shoreline, WA. 98133. Int registrar and sent to both advisors ancelled and the deposit becomes a place. Is registration form. If for the entire troop.
iri scouts of western Cascade Challenge 2018		
washington		mbassador OR IRM ring for the S/A level)
# Girls by Grade: 6789101112	Enclosed Depo	osit Amount:
 Will your troop be requesting Gluten Free for the G Will your troop be requesting Vegetarian option for Would your troop work with an IRM, assigned and Would you troop present one of 3 the Flag Ceremo 	or the Challenge Dinner? ead of time?	Yes No Yes No Yes No Yes No
Name of GSWW Outdoor Trained Adult	Name of Adult Fir	rst Aider
# 1 Advisor Name (or IRM Scout)		Phone
# 1 Advisor (or IRM) email		
# 1 Advisor (or IRM) Address:	City	Zip
# 2 Advisor Name		_
# 2 Advisor email # 2 Advisor Address:	City	7 in