Girl Scouts®

Girl Scouts of the Chesapeake Bay Council, Inc.

Adult Education Registration

501 South College Avenue
Newark, Delaware 19713-1301
T 302.456.7150 • 800.341.4007
F 302.456.7188 • www.GSCB.org
Bernice Chandler, Volunteer Services Assistant, bchandler@cbgsc.org, ext. 7174

Please print clearly or type, then fax or mail to the above address.

Name: _____
First Middle Last

Home address: _____
Street address

_____
City State Zip

Day phone: _____ Cell phone: _____

E-mail: _____

Registered with Troop: _____ Service Unit: _____ Grade level: _____

Special needs *(please explain):* _____

Course Information

Date	Name of Course	Session	Location	Fee

Total $: _____

Payment Type: Check details *(if sent separately)*

Name on check: _____

Check # _____

Check # _____ Date mailed: _____

Credit Card

☐ Mastercard ☐ Discover ☐ American Express ☐ Visa

Name _____

Card # _____ Exp. date _____

Adult Education Financial Assistance Request

Allocation of assistance will be based upon the availability of funding and assumption of a reasonable portion of the expenses by the adult or the Troop.

Total expense: $_____ Troop/Individual contribution: $ _____ Amount requested: $_____