

Scout and Girl Scout Program Request Form and Agreement



Instructions for Completing a Fillable PDF

1. Use only the latest version of Adobe Reader
2. **Avoid completing the form online within your web browser.** *Any information you type on the form while open in a web browser will not be saved and will automatically be lost.*
3. **Before completing the form,** save the document to your computer
4. Once you have saved the form to your computer, **you need to open the form from the location you saved on the computer.** For example, if you saved the PDF on the Desktop, open the document from the desk top.
5. Once the document is open, you can begin typing in the information.
6. After the form is complete, save the form again before emailing.

Thank you

Scout and Girl Scout Program Request Form and Agreement



Please fill out all items on this form completely and email a minimum of 45 days prior to your preferred program date, no exceptions. Programs will not be scheduled without submitting the request form. Once this form has been submitted, you will receive a separate email from Oxbow Meadows to inform you of your program dates, waivers, an invoice, and Scout program confirmation.

Email completed forms to johnson_lauren1@columbusstate.edu

SCOUT GROUP INFORMATION:

Contact Name: _____ Contact Email: _____
 Contact Phone: _____ Contact Address: _____
 City/State/Zip Code: _____

SCOUT PROGRAM INFORMATION:

Troup #: _____ # of Scouts participating: _____
 # of Troup Leaders: _____ # of Parents: _____ # of Tagalong siblings: _____

Please provide the dates you would like to schedule a Scout Program (*Saturdays only*):

First Choice: _____ Second Choice: _____ Third Choice: _____
Day/Month/Year Day/Month/Year Day/Month/Year

Desired Start Time (*anytime from 10:00am-3:00pm*): _____

SCOUTS:

Program Desired (*Please select from the following list, each program is 1-hour in length:*

- | Webelos | Tiger | Wolf | Bear |
|------------------------------------------------|---------------------------------------------|----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Adventures in Science | <input type="checkbox"/> Backyard Jungle | <input type="checkbox"/> Call of the Wild | <input type="checkbox"/> Fur, Feathers, and Ferns |
| <input type="checkbox"/> Earth Rocks! | <input type="checkbox"/> Tigers in the Wild | <input type="checkbox"/> Paws of the Path | <input type="checkbox"/> Forensics |
| <input type="checkbox"/> Into the Wild | <input type="checkbox"/> Stories in Shapes | <input type="checkbox"/> Air of the Wolf | <input type="checkbox"/> Super Science |
| <input type="checkbox"/> Into the Woods | | <input type="checkbox"/> Digging in the Past | |
| | | <input type="checkbox"/> Finding Your Way | |
| | | <input type="checkbox"/> Grow Something | |
| | | <input type="checkbox"/> Motor Away | |

GIRL SCOUTS:

Program Desired *(Please select one from the following list, each program is 1-hour in length:*

- | Daisies | Brownies | Juniors | Cadets |
|------------------------------|-----------------------------------------|------------------------------------------|----------------------------------------|
| <input type="checkbox"/> TBA | <input type="checkbox"/> Home Scientist | <input type="checkbox"/> Flowers | <input type="checkbox"/> Special Agent |
| | <input type="checkbox"/> Senses | <input type="checkbox"/> Geocacher | <input type="checkbox"/> Trees |
| | <input type="checkbox"/> Hikers | <input type="checkbox"/> Animal Habitats | |
| | | <input type="checkbox"/> Gardner | |
| | | <input type="checkbox"/> Detective | |

If you are requesting a program not listed above, please provide details and Oxbow staff will do their best to create a program for your group: _____

Additional Comments: _____

Please Read Carefully

Patron by its signature herein acknowledges receipt of a copy of and compliance with such policy, as set forth on Exhibit A. At any time, the Institution may request, and must be promptly provided with, copies of all pre-screening and training verification. This form must be submitted at least 45 days prior to scheduled program date, no exceptions.

Name: _____ Date: _____

Signature: _____

EXHIBIT A

Programs Serving Minors

1. Institutional Policy: If Patron operates a program or activity that provides for the care, custody, or control of minors, Patron shall be governed by and comply with all requirements of CSU's policy on programs serving minors. Such requirements include but are not necessarily limited to those listed below.
2. Duty of Care: Patron shall operate such program/activity in a reasonably safe manner.
3. Forms: Patron shall use all appropriate forms related the operation of the program / activity, which may include but are not necessarily limited to parental consent forms, participant conduct agreement forms, medical information and release forms, medical authorization treatment forms, medical authorization to administer medication forms, media release, pickup authorization forms and others.
4. Criminal Background Checks: Patron shall properly screen and conduct criminal history background checks, including the National Sex Offender Registry, on all employees, volunteers, counselors, chaperones and others who are reasonably anticipated to have direct contact or interaction minor program participants. Personnel in charge of screening volunteers should be aware of the inherent limitations of background checks and should seek to utilize other screening methods, when possible, in addition to background checks to include in-person interviews and reference checks.
5. Supervision: Every minor participant must be properly supervised at all times in the immediate presence of at least one authorized adult while participating in the program/activity. Patron certifies that there will be appropriate supervision and that there will be an appropriate participant-to-supervisor ratio, which may vary depending on the age of the participants, the nature of the activity, and whether the program has an overnight component.
6. Training: Patron shall provide training to all employees, volunteers and others assisting with the program/activity that addresses mandatory reporting requirements, appropriate contact with minors, safety and security procedures, and response protocols for injury or illness, and staff or participant misconduct.
7. Safety and Security: Patron agrees to ensure the safety and protection of program participants and to establish protocols for reporting injuries, staff misconduct, participant misconduct, and procedures for secure pickup and drop-off of program participants. Patron agrees to establish security measures (e.g., where to meet and where to go if lost, responses and protocols for weather alerts, accidents, missing persons, etc.), and to communicate those measures to program participants.
8. Reporting Obligations: Criminal activity should be reported immediately to the Institution's campus police department. Campus law enforcement professionals can assess the situation and determine what other notifications or action is necessary.
9. Known or Suspected Abuse or Neglect of Minors: If Patron and/or any of its employees, volunteers, or other agents or any other authorized adult present at the program/activity know, suspect, or receive information providing reasonable cause to believe that a minor has been abused or neglected, or if Patron or such other individuals have other concerns regarding a minor's safety, Patron or such other individual must report the situation immediately to the Institution's campus police department and to the Georgia Department of Human Services (and/or the Division of Children and Family Services) by calling 1-855-GACHILD (422-4453), as required by Georgia law. Patron hereby acknowledges its understanding of this reporting requirement for known or suspected abuse or neglect of minors.