

Troop Roster

School/Town _____ Troop # _____ Year _____ Service Unit _____

FA Bkgd

___ ___ Leader _____ Phone (H) _____ (W) _____ (C) _____

Address _____ City _____ Zip _____ Email _____

Indicate if registered with another troop ___Yes ___No If yes, Troop # _____ Position Code _____

Training – Discovering Girl Scouts _____ Connecting to Your Age Level _____
Date Date

___ ___ Co-Leader _____ Phone (H) _____ (W) _____ (C) _____

Address _____ City _____ Zip _____ Email _____

Indicate if registered with another troop ___Yes ___No If yes, Troop # _____ Position Code _____

Training – Discovering Girl Scouts _____ Connecting to Your Age Level _____
Date Date

___ ___ Cookie Mgr _____ Phone (H) _____ (W) _____ (C) _____

Address _____ City _____ Zip _____ Email _____

Indicate if registered with another troop ___Yes ___No If yes, Troop # _____ Position Code _____

Meeting day _____ Time _____ Location _____

___ Troop Treasury Report submitted

Please list adults first, followed by girls. Please circle whether member is a girl or adult. Make copies and additional sheets as needed.

___ ___ Girl/Adult Name _____ Grade/ Position _____ Phone _____

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