

## **Adult Membership**

Join the global network of 2.5 million Girl Scouts

Membership Year through 9/30/2025

Girl Scouting builds girls of courage, confidence, and character, who make the world a better place.

## REGISTER ONLINE TODAY AT GIRLSCOUTS.ORG/ADULTJOIN

Cone: O New Member O Renewii	ng Member O Lifetime Mo	ember Troop #:		Date:
Title or Salutation: O Mrs. O Ms.	O Miss O Mr. O Dr.	O Other (please sp	pecify):	
First Name	Last Name			
Address			Apartment	#
City	State		ZIP Code	
( ) Home Phone	Business Phone			
Cell Phone	Email Address			
Employer	Title/Occupation			
I wish to opt out*: O Texts O Emai	ls By not opting out, eac autodialed informatio understanding such c	nal or marketing tex	t messages at the ce	plicable), agrees to reciet Il number above,
Girl Scouts respects and welcomes people from all backgrounds and abilities. By completing the following information (as defined by the US	Gender: O Female O Male	as a gir	s as Girl Scout:  : dult:	Date of Birth (mm/dd/
Census), you ensure support and funding for girls in your community. Hispanic/Latina is defined as an ethnicity, not a race, therefore is reported separately. This informatior is used for statistical purposes only.	I am (check all that at O American Indian or Alaskan Native O Asian O Black or African An O Hawaiian or Pacific	O Whit O Othe	eer (please specify):	I am Hispanic or Latin O Yes O No O I choose not to shar at this time
I will be participating in Girl Scouts O Volunteer – I am/will be volunteer O Parent/Family – I am a parent/gua O Girl Scout Alumnae – I was a Girl S O Community Partner O Staff – I am/will be employed by C O Other (please specify):	ing for Girl Scouts rdian/family member of a G Scout, either as a girl, adult, Sirl Scouts	or both		
As a volunteer, I would like to partic	cipate in the following role		• • • • • • • • • • • • • • • • • • • •	pop(s)/Service Unit #s:
O Support Volunteer for Group/Troo O Service Team or Unit Volunteer O Learning Facilitator O Other (please specify):	p #	# #	#	# # SU
Media Permission When participating in Girl Scout activ (myself or the person I am registerin consent to be interviewed, photogral videotaped, or electronically imaged purposes of promotional materials, r releases, or other published formats either the local Girl Scout council or Scouts of the USA. The images will b sole property of the local Girl Scout or Girl Scouts of the USA. I hereby re	g) give To serve God ar To help people a for the ews for Girl e the council lease ut	will try: nd my country,	The Girl Scout Law I will do my best to honest and fair, friendly and helpfu considerate and ca courageous and sti responsible for wha and to respect myself and respect authority, use resources wise make the world a b be a sister to every	be  , ring, ong, and at I say and do, others, ly, etter place, and
and hold harmless the local Girl Scot council and Girl Scotts of the USA fr claim arising from the use of these in O I wish to opt out at this time	· · · · · · · · · · · · · · · · · · ·		be a sister to every	

## MEMBERSHIP OPTIONS

GIRL SCOUT MISSION

- Annual Membership
   Annual Fee: \$25
- New Members ONLY
   Extended Year: \$35
   (Available for purchase between May 1 and September 30, 2024.
   Adult membership will be valid until September 30, 2025.)
- One-time Fee: \$400
- Youth Alum Lifetime Membership
   One-time Fee: \$200
   (Former girl member who is 18-29 years old.)
- 10 Year+ Lifetime Membership
   One-time Fee: \$200
   (Adult member with 10 or more years of volunteer service.)
- Healthy Blue NE Members ONLY
   (Healthly Blue NE members can claim a \$30 Girl Scout membership reward to use towards membership.
   Go to www.healthybluene.com and login to your account for more info.)

**YES!** I would like to make a donation to the Family Partnership campaign to directly benefit girls in our community. Please send our Family Partnership Patch (for gifts of \$25+). Enclosed is my tax-deductible donation of:

0 \$500	0 \$250	0 \$150
0 \$100	0 \$50	0 \$25
o Other \$_		

PAYMENT	INFORMATION	

Donation: \$		
Total Attach	ed:	
o Cash	o Check*	
o Amex	o Discover	
o Visa o Other:	o MasterCard	
Credit Card	#	
Credit Card Exp. Date	# CCV Code	

Return this registration form, along with GSUSA annual membership fee or applicable Lifetime fee to your local council. Fees are non-refundable or transferable to another person.

FOR OFFICE USE ONLY: