

2022 Cookie Program Parent/ Guardian Responsibility Form

- The adult responsible for the payment of the Cookies should complete this form.
- Please read this form carefully before signing.

I understand and agree to:

Participation Guidelines

1. My daughter has my permission to participate in the Girl Scout 2022 Cookie Program.
2. My daughter cannot participate in the Girl Scout 2022 Cookie Program unless all the blanks on this form are completed.
3. My daughter cannot participate in the Girl Scout 2022 Cookie Program if she is not a registered Girl Scout.

Payment Agreement

1. I understand that once Cookies are received in my daughter's name, as her parent/guardian I am responsible for collecting all monies owed and I am responsible for all monies received in payment of Cookies.
2. I understand that all **unsold Little Brownie Cookies CANNOT be returned**, and that I am responsible for payment of any unsold Cookies received by or checked out in my daughter's name.
3. I understand that I will turn in cash, cashier's check or money order to my troop leader for all Cookies received in my daughter's name.
4. **I understand that if I do not turn in all monies for Cookies received on my daughter's behalf by March 14, 2022; I will be reported to the Council for non-payment, which may result in serious collection actions.**

Girls Name _____ Troop Number _____

Girl's T-Shirt Size

<input type="checkbox"/> Youth Small	<input type="checkbox"/> Youth Medium	<input type="checkbox"/> Youth Large/Adult Small
<input type="checkbox"/> Adult Medium	<input type="checkbox"/> Adult Large	<input type="checkbox"/> Adult X-Large
<input type="checkbox"/> Adult 2XL	<input type="checkbox"/> Adult 3XL	

Responsible Adult _____ SSN# XXX-XX-____ (last 4 digits)

Email Address _____ Birthdate __/__/__ (mo/date/year)

Driver's License # _____ State of Issue _____ Exp Date _____

City _____ State _____ Zip _____ Cell Phone# _____

Employer _____ Work# _____

Spouse's Name _____ Driver's License # _____

Spouse's Employer _____ Work# _____

Responsible Adult Signature _____ **Date** _____