



2010 CALENDAR SALE ORDER FORM

Girl Scout's Name _____ Troop Number _____ Date Due _____

Name	Address	Phone #	Wall Calendar \$5.00	Pocket Planner \$4.00	Day Planner \$7.00	Amount Paid
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Girl Scout Council of the NATION'S CAPITAL
4301 Connecticut Ave., NW
Washington, DC 20008 (202) 237-1670



Wall
\$5.00



Pocket
\$4.00



Planner
\$7.00

Girl Scout, _____, a registered member of Troop _____, has my permission to participate in the 2010 Calendar Sale.

- My daughter has registered as a Girl Scout prior to the start of the sale.
- **I accept financial responsibility, including prompt payment**, for all product and money she receives and will also see that she has adult guidance at all times. I understand that unsold product may NOT be returned.
- **I accept responsibility to meet all troop deadlines.**
- I understand all past due accounts may be sent to a collection agency.
- I understand that all proceeds are troop or council funds and **NOT** the property of my daughter as per GSUSA standards and policy.

Signature of Parent/Guardian

Date

Please PRINT name here



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		TOTALS				\$

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