

# TRAVELING WITH YOUR GIRL SCOUT(S)

Planning trips and travel is an opportunity for Girl Scouts to develop decision-making skills and work collaboratively with leaders and troop volunteers. All trips should involve Girl Scouts in the planning process.

Overnight, regional trips (Idaho), domestic (US), and international trips <u>all</u> require Council approval. Following are a list of forms you may need to complete and submit to the Council office depending on your destination. Please contact <u>customercare@girlscouts-ssc.org</u> or call (208) 377-2011 for any additional questions.

- 1. Intent to Travel Checklist
- 2. Intent to Travel form
- 3. Plan 3P/3PI Insurance
- 4. Program Credit Reimbursement

International

Trip

# girl scouts

# Travel Progression



# Overnight

Spend two to three

nights in your

Short Trip

region, up to a six-

hour drive away

from home. Girl

# Local

Visit a nearby spot, possibly during Recommended for: Daisy, Brownie

Minimum age: Daisy

# Day Trip

maybe at a council nearby attraction. single overnight— Help Girl Scouts plan their first

Recommended for: Brownie, Junior

Recommended for:

Daisy, Brownie,

Minimum age: Brownie (with Overnight

> Trip experience in Daisy (with Day Minimum age: Girl Scouting)

> > Minimum age:

experience in Girl Scouting)

### Extended Trip

Travel the country! Extended trips last place more than a nights OR take six-hour drive four or more from home.

plan, and

prepare.

Recommended

Recommended for: Cadette, Senior, Ambassador

Scouts plan budget

and schedule.

Minimum age: Cadette (with

> Junior (with Short Trip experience in Minimum age: Girl Scouting)

Recommended for: Junior, Cadette

Scouts can sign up for independent opportunities or travel and meet friends through council-offered new Girl Scout Individual Girl Destinations GSUSA's program. travel

> take two to three years to save for,

life-changing world! These

Travel the

trips usually

Recommended Ambassador for: Senior,

Ambassador

experience in Girl Extended Trip Minimum age: Cadette (with Scouting)

experience in Girl

Scouting)

Extended Trip

When moving up to the next experience with cultures step, consider each Girl groups, flexibility, and Scout's independence, ability to work well in other than their own.

## Plan an all-day trip. Try a council event or local attraction. Field Trip

your regular meeting time.

Through progression, Girl Scouts build skills to become lifelong travelers and global citizens. Girl Scouts take the lead in planning a new adventure at every level.



#### INTENT TO TRAVEL CHECKLIST: REQUIRED FOR ALL OVERNIGHT TRAVEL

Girl Scouts of Silver Sage 8948 W Barnes St. Boise, ID 83709 (208) 377-2011 or (800) 846-0079 customercare@girlscouts-ssc,org www.girlscouts-ssc.org

| International   | CHECKLIST | COUNCIL<br>APPROVED |
|---|-----------|---------------------|
| Plan 3P/3PI Insurance   |           |                     |
| U.S. Department of State Travel   |           |                     |
| Domestic  |           |                     |
| Plan 3P Insurance (outside of Idaho)  |           |                     |
| Intent to Travel Form   |           |                     |
| Copy of non-expired Drivers Licenses  |           |                     |
| Copies of non-expired car insurance which matches the cars written on the Intent to Travel Overnight form along with the name(s) of the driver(s) |           |                     |
| A roster of girls and adults going on the trip; adults will need a current membership and valid background check                                  |           |                     |
| Copy of current CPR/First Aid certifications  |           |                     |
| Trip Itinerary  |           |                     |
| Required Training – If Overnight: 401 Planning Overnight Trips with Girls   |           |                     |
| Required Training – If Camping: 402 Outdoor Basics  |           |                     |
| Required Training – If Camping: 403 Troop Camp Skills   |           |                     |

**Green** - International Only

Yellow - Domestic Only

White - Both International and Domestic



#### Activity Accident Insurance.

GSUSA sponsors Activity Accident insurance with Mutual of Omaha for all Girl Scout members. This insurance is intended to be a supplemental accident injury coverage to cover out-of-pocket medical expenses for those injured during a Girl Scouts supervised event, activity, troop meeting, or trip. There are four categories of coverage:

<u>Basic Plan 1</u>. The Basic Plan 1 automatically covers Girl Scout members and non-members, who are invited to participate, and are injured during the Girl Scout sponsored and supervised activity or trip.

Basic Plan 1 will pay the first \$140.00 of medical expenses plus any out-of-pocket medical expenses that are not covered under the injured person's personal (or family) medical insurance, such as out-of-network charges or large deductibles or ambulatory services.

If the injured person does not have medical insurance, the Basic Plan1 will drop down to cover medical expenses from dollar one.

**Note:** Most situations within Girl Scouts are covered by the automatic Basic Plan 1 which covers *accidental bodily injury*. Accidental bodily injury would include exposures like a tick bite or food poisoning, for example, as long as the incident is reported as an accident or incident to your council at the time it occurs.

<u>Plan 3P.</u> Accident plus Sickness: Plan 3P covers the same as Basic Plan 1 *plus sickness coverage*. Sickness coverage must be purchased separately and is intended for all non-Idaho domestic travel or as an option for extended, long-distance trips.

<u>Plan 3Pl.</u> Accident plus Sickness for International Trips: Plan 3Pl coverage is needed for international trips. It provides accident plus sickness coverage for trips outside of the USA. The Basic Plan 1 will not cover international trips, so it is necessary to purchase Plan 3Pl when taking Girl Scouts on international travel.

International Inbound Accident plus Sickness. Accident plus Sickness coverage for Councils who are hosting Girl Guides/Girl Scouts visiting the United States from out of country.

Questions? Please email customercare@girlscouts-ssc.org or call (208) 377-2011



#### INTENT TO TRAVEL: REQUIRED FOR ALL OVERNIGHT TRIPS

Girl Scouts of Silver Sage 8948 W Barnes St, Boise, ID 83709 (208) 377-2011 or (800) 846-0079 www.girlscouts-ssc.org customercare@girlscouts-ssc.org

NOTE: This form must be received by Council's Customer Care at least <u>4 WEEKS</u> before your domestic planned trip to allow enough time for data verification and approval. Since this approval process ensures the safety of our volunteers and our girls, we reserve the right to refuse approval, if not received <u>4 WEEKS</u> in advance. If travel is denied, either because submission was not timely or documentation was missing, troop funds or girls' Program Credits cannot be used for the travel.

If your trip is an international trip, all documents must be received by Council's Customer Care at least <u>3 MONTHS</u> before the planned trip to allow sufficient time for data verification and approval. Additional insurance is required for all non-Idaho domestic (3P) and all International trips (3PI)

Girl Scouts are not allowed to travel to international locations rated "Level 4: Do Not Travel" by the <u>United States Department of State</u>, as outlined in the Safety Activity Checkpoints.

| Troop #:SU #:   | Circle: Daisies                | Brownies Juniors      | Cadettes Seniors Ambassadors                                |   |
|---|--------------------------------|-----------------------|---|---|
| Description of Travel:                                |                                |                       |   | _ |
| Physical Address of Site:                             |                                |                       |   | _ |
| If applicable: Lodging Type                           | e: □Campsite [                 | □AirBnb □H            | Hotel/Motel   |   |
| Lodging Address:                                      |                                | City                  | State   | _ |
|   |                                |                       | # of Adults:  | _ |
| Adult in Charge                                       | Posit                          | ion                   | Email   |   |
| Address City  | State                          | e ZIP Code            | Phone #   | _ |
| Other adults accompanying t                           | he girls ( <i>attach addit</i> | ional sheet if necess | sary):<br>  | _ |
| ☐ All adults involved in this Scout membership year w |                                |                       | ered members of the current Girl<br>inal background check). | _ |
| Continue on pg 2                                      |                                |                       |   |   |

Send this completed form to Customer Care for review and final travel approval.

Email: <a href="mailto:customercare@girlscouts-ssc.org">customercare@girlscouts-ssc.org</a> or mail to: 8948 W Barnes St, Boise, ID 83709

| Fo               | rm of transportation:   |                                   |                                      |                                    |  |  |
|------------------|---|-----------------------------------|--------------------------------------|------------------------------------|--|--|
| Ad               | ults driving on this trip, if appli   | cable                             | Copy of driver's<br>License Attached | Copy of auto<br>Insurance Attached |  |  |
|                  | Name  | Make & Model of Car               | — <u> </u>                           |                                    |  |  |
|                  | Name  | Make & Model of Car               |                                      |                                    |  |  |
|                  | Name  | Make & Model of Car               | <u> </u>                             |                                    |  |  |
| En               | nergency contact staying in tow   | n during the trip is: _           |                                      | _                                  |  |  |
| Re               | lationship to the Emergency Co  | ntact                             |                                      |                                    |  |  |
| Но               | me Phone:   | Work Phone:                       | Cell Phone                           | :                                  |  |  |
| Ou<br>(At<br>cer | fety Checklist: r First Aider is: tach a copy of the current CPR/I tifications required for your trip     | based on Safety Activ             |                                      | y additional safety                |  |  |
|                  | We will have a First-Aid kit or   |                                   |                                      |                                    |  |  |
|                  | We have made/will make alte   | -                                 |                                      |                                    |  |  |
|                  | If the troop will be in a body o certification.   | f water a lifeguard is r          | required. Attach a copy of           | f the lifeguard                    |  |  |
| _                | If any Safety Activity Checkp<br>requirements you will adhere   |                                   | ip, list the checkpoints an          | d the additional safety            |  |  |
| Pa               | perwork Checklist:  |                                   |                                      |                                    |  |  |
|                  | I have obtained/will obtain sig   | ned Permission for S <sub>l</sub> | pecial Activities forms for          | each girl participant.             |  |  |
|                  | I have attached a Trip Itinera  | ry.                               |                                      |                                    |  |  |
|                  | I have attached a roster of gir   | ls attending the overn            | ight trip.                           |                                    |  |  |
|                  | I will be using Program Credit  | s for Council ONLY pr             | operty fees. (Budget mus             | t be provided)                     |  |  |
|                  | surance Checklist: Insurar<br>KCEPTIONS   | nce plans require a               | a 2-week processing t                | ime – NO                           |  |  |
|                  | If the trip is a domestic trip outside of Idaho, I have obtained/will obtain Plan 3P Liability Insurance. |                                   |                                      |                                    |  |  |
|                  | If the trip is out of the country, I have obtained/will obtain Plan 3PI Liability Insurance.              |                                   |                                      |                                    |  |  |
| Tr               | aining Checklist:   |                                   |                                      |                                    |  |  |
|                  | Overnight only: At least one of with Girls  | f the adults on this trip         | p has completed 401 Plan             | ning Overnight Trips               |  |  |
|                  | If we are troop camping, at lea<br>and 403 Troop Camp Skills o  |                                   |                                      | 402 Outdoor Basics                 |  |  |
| Coi              | ntinue on pg 3  |                                   |                                      |                                    |  |  |

Send this completed form to Customer Care for review and final travel approval.

Email: <a href="mailto:customercare@girlscouts-ssc.org">customercare@girlscouts-ssc.org</a> or

mail to: Girl Scouts of Silver Sage 8948 W Barnes St, Boise, ID 83709

| Intent to Use Program Credits – This is<br>Ambassador Troops ONLY       | s for Cadettes, Seniors, and          |  |  |  |
|---|---------------------------------------|--|--|--|
| $\square$ We engaged girls in the program travel planning a             | and budgeting.                        |  |  |  |
| ☐ We incorporated the Girl Scout Leadership Exper                       | ience elements in the travel program. |  |  |  |
| ☐ We have attached a detailed description of our day or overnight trip. |                                       |  |  |  |
| ☐ We have attached a detailed budget for the event.                     |                                       |  |  |  |
| Signatures:   |                                       |  |  |  |
| Person in charge of travel/Date   | Council Approval/Date                 |  |  |  |

## **girl scouts** of silver sage

#### PLAN 3P OR PLAN 3PI INSURANCE REQUEST FORM

Girl Scouts of Silver Sage 8948 W Barnes St. Boise, ID 83709 (208) 377-2011 or (800) 846-0079 www.girlscouts-ssc.org

This form must be submitted at least <u>four (4) weeks</u> prior to travel dates.

Intent to Travel Form must be submitted and approved prior to purchasing this insurance.

Checks may be made payable to 'Girl Scouts of Silver Sage Council, Inc', or you may pay with troop credit card after form has been received.

| Name of Adult in Charge                          |                   |                | Tro                       | op Number         | Serv                                   | ice Unit                      |                 |
|--|-------------------|----------------|---------------------------|-------------------|--|-------------------------------|-----------------|
| Phone Number                                     |                   |                | Email Addre               | ss                |  |                               |                 |
| Intent to Travel Fo                              | orm submitte      | ed and apj     | proved?                   |                   |  |                               |                 |
| Plan 3P Within                                   | United Sta        | ates:          |                           |                   |  |                               |                 |
|  |                   |                | (1)                       | (2)               | (3)                                    | (4)                           |                 |
| Name &<br>Physical<br>Address of<br>Event        | Beginning<br>Date | Ending<br>Date | Number of<br>Participants | Number<br>of Days | Number of<br>Participant<br>Days (1x2) | Premium<br>Each Day<br>@ 0.70 | Total<br>(3x4)  |
| SAMPLE:<br>Savannah, GA                          | 6/1/xx            | 6/8/xx         | 10                        | 8                 | 80                                     | \$0.70                        | <b>\$56.</b> 00 |
|  |                   |                |                           |                   |  |                               |                 |
| TOTAL  | N/A               | N/A            |                           |                   |  | \$0.70                        |                 |
| Plan 3PI for I1                                  | nternation        | al Trav        | <b>el:</b> (1)            | (2)               | (3)                                    | (4)                           |                 |
| Name &<br>Physical<br>Address of<br>Event        | Beginning<br>Date | Ending<br>Date | Number of<br>Participants | Number<br>of Days | Number of<br>Participant<br>Days (1x2) | Premium<br>Each Day<br>@ 1.17 | Total<br>(3x4)  |
| SAMPLE: Royal<br>Caribbean<br>Cruise,<br>Bahamas | 6/1/xx            | 6/8/xx         | 10                        | 8                 | 80                                     | \$1.17                        | <b>\$93.6</b> 0 |
|  |                   |                |                           |                   |  |                               |                 |
|  |                   |                |                           |                   |  |                               |                 |
| TOTAL  | N/A               | N/A            |                           |                   |  | \$1.17                        |                 |
| Adult in Charge of                               | Travel            |                |                           |                   | Date                                   |                               | _               |
| Council Approval _                               |                   |                |                           |                   | Date                                   |                               | _               |

#### Roster of participants:

| Participant First Name                | Participant Last Name | Age |
|---------------------------------------|-----------------------|-----|
|                                       |                       |     |
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|                                       | <u> </u>              |     |

Turn this form in with the rest of the Intent to Travel packet.



## PROGRAM CREDIT REIMBURSEMENT FOR TROOP OVERNIGHT TRAVEL

Girl Scouts of Silver Sage 8948 W Barnes St, Boise, ID 83709 (208) 377-2011 or (800) 846-0079 www.girlscouts-ssc.org

#### How to Redeem Program Credits for Troop Overnight Travel

- Please allow at least 3 weeks to receive your check once all the following is submitted.
- Program Credits can be reimbursed when the Intent to Travel form has been completed and approved by a Council Staff member.
- Compile all Program Credits and complete the Redemption Detail section at the end of this form.
- Please attach all receipts already collected.
- Please submit ALL Program Credits for your trip at one time.
- Include a copy of the signed and approved Intent to Travel.
- If Program Credits are being shared to cover the costs for sisters, please note this on the Program Credits with the names of the sisters.
- If you are looking for a reimbursement before your trip, please attach any receipts from payments made prior to your trip.

| Event Name                                     | Event Date(s)        | _   |
|--|----------------------|-----|
| Please make payable Troop#(checks will only be | made to a Troop) SU# | _   |
| Mail to  |                      |     |
| AddressStreet                                  | City/State           | ZIP |

#### **Program Credit Redemption Details**

| Name of Girls<br>going on the Trip | Year of<br>Program<br>Credits | Amount<br>in \$5's | Amount in<br>\$10's | Amount in<br>\$25's | Amount in<br>\$50's | Total |
|------------------------------------|-------------------------------|--------------------|---------------------|---------------------|---------------------|-------|
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
| - W                                |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |

| Name of Girls<br>going on the Trip | Year of<br>Program<br>Credits | Amount<br>in \$5's | Amount in<br>\$10's | Amount in<br>\$25's | Amount in<br>\$50's | Total |
|------------------------------------|-------------------------------|--------------------|---------------------|---------------------|---------------------|-------|
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
|                                    |                               |                    |                     |                     |                     |       |
| Grand Totals                       |                               |                    |                     |                     |                     |       |

| Troop Leader/Date | Council Staff Member/Date |
|-------------------|---------------------------|

Please send completed, signed form with all attached Program Credits and supporting documentation to

Girl Scouts of Silver Sage Attn. Customer Care 8948 W Barnes St, Boise, ID 83709