

# Training Registration Form

1. **Trainings are designed for adult audiences.** Girls may attend only if the training has been designed for them. In this case, information will be noted in the training information for that course.
2. **Pre-registration** is mandatory; registered participants are guaranteed a seat and course materials. **We cannot take registrations over the telephone.** Please cancel if you are unable to attend for any reason. Call the training registrar at 713-292-0238 or 1-800-392-4340 ext. 1238 so that someone on the waiting list may use the space reserved for you. For your convenience, voice mail is available 24 hours a day.
3. **Children may not be brought to training.** Childcare facilities are not available at course locations and children may not sit with an adult who is attending a course. For convenience, all required troop leadership courses are available through home study.
4. **Arrive** 10-15 minutes early for the training. Time does **not** allow for participants to leave the training site for lunch.
5. **What if I have special needs?** It is recommended that volunteers with special needs make their needs known when registering so trainers can prepare accordingly. Most of the facilities used by the Council are handicap accessible.
6. **Financial scholarships** are available. Financial assistance forms (F-134G) are available online on the Council Web site (www.gssjc.org), at the Girl Scout Center, and at all service centers. **Volunteer must be a registered Girl Scout member to receive assistance.**
7. **Refunds** are given only in the following instances:
  - Training course is full.
  - Training course is cancelled by the Volunteer Development Department. (Minimum number not met or weather conditions prohibitive.)
  - Training date/time is changed by the Volunteer Development Department to a time not convenient for participants.
8. **Credit** to another training is given if a participant cancels two weeks prior to registration deadline. Call 713-292-0238 or 1-800-392-4340 ext. 1238 to cancel.
9. **Enclose fees** (if applicable) with registration form. Make checks payable to GSSJC - **Do NOT send cash.**

**Complete this training registration form and mail to:** GSSJC, Training Registrar, 3110 Southwest Freeway, Houston, TX 77098 or fax to 713-292-0340 if there is no fee or fee is paid by credit card.

✂-----**Training Registration Form**-----Account Code 10-12-01-6240

Check this box if you have new information for our records.

**Registration For:**

Adult Female     Adult Male     Senior/Ambassador Girl

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone # \_\_\_\_\_  
 Cell Phone # \_\_\_\_\_  
 Work Cell Phone # \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Area/Service Unit: \_\_\_\_\_

For statistical purposes, please indicate one of the following:

African American     Asian/Pacific Islander     Hispanic  
 Caucasian     Native American     Other

Add fees together to get subtotal                    \$ \_\_\_\_\_  
 \* LESS financial assistance applied for (-)        \$ \_\_\_\_\_  
 (GSSJC F-134G)

**TOTAL ENCLOSED:**    \$ \_\_\_\_\_

Check # \_\_\_\_\_  
 Bill to:  Visa     MasterCard     Discover     American Express  
 Credit Card # \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**1. Course Name:** \_\_\_\_\_  
 Date/Time: \_\_\_\_\_ Fee \$ \_\_\_\_\_  
 Location: \_\_\_\_\_

**2. Course Name:** \_\_\_\_\_  
 Date/Time: \_\_\_\_\_ Fee \$ \_\_\_\_\_  
 Location: \_\_\_\_\_

**3. Course Name:** \_\_\_\_\_  
 Date/Time: \_\_\_\_\_ Fee \$ \_\_\_\_\_  
 Location: \_\_\_\_\_

**Use this box to register for Training Events  
 (except ETC and Crazy Quilt)**

Event Code: 10-12-01-6240 ♦ Registration Fee \$12

Name of Event: \_\_\_\_\_

*Please indicate choices by course name for each time referenced.*

Time	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice
_____	_____	_____
_____	_____	_____
_____	_____	_____

**For Office Use Only**

Date: \_\_\_\_\_ Event Code# \_\_\_\_\_ Clerk: \_\_\_\_\_ Amount \$ \_\_\_\_\_ Approved by: \_\_\_\_\_ Rev.4/10  
 Accounting Batch Number: \_\_\_\_\_