



Holyoke Service Center
301 Kelly Way, Holyoke, MA 01040-9685
Fax: 413-536-1383

Worcester Service Center
81 Gold Star Boulevard, Worcester, MA 01606-2813
Fax: 508-852-7674

Adult Training Registration Form

Name: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____ E-mail: _____
Needed for updates/cancellations.

Street Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact Name: _____ Phone: _____

Level(s) you work with: Daisy Brownie Junior Cadette Senior Ambassador Adult

Parent/Guardian Signature (if under 18 years of age): _____

Photo Release: Photographs, videos, and audio recordings taken of me by authorized Girl Scout staff or their designees may be used for council publications, print and television media, radio and on the World Wide Web. Yes No

Special Needs - Please indicate how we can assist you (i.e. wheelchair, allergies, etc.): _____

Training Specific Information

Course Name	Location	Date & Time	Fee*	Receipt # Office Use Only
Total Due:				

* Please pay full amount listed in the fee column for all courses. Payments can be made using cash, troop or individual check or credit card. Troop funds can be used to pay for adult training. Troop checks must have two (2) signatures.

Mail form and payment to: GSCWM - Training Registrar, 81 Gold Star Blvd, Worcester, MA 01606.

If paying by Credit Card: MasterCard VISA Discover

Credit Card #: _____ Exp. Date: _____

Name on Card: _____ Signature: _____