



Property Reservations Application Regular Use Meeting Form

Registrar Department 9525 Monte Vista Ave. Montclair, CA 91763
T (626) 677-2366 F (909) 624-7928 www.girlscoutsla.org

Complete and return all forms with applicable fees to the Registrar Department Attn: Property Registrar

Name: _____ Troop Number: _____

Name of Organization (If Non Girl-Scout): _____

Meeting Information:

Property Requested: _____ Room (If Applicable): _____

Meetings to be held: ___ Weekly ___ Bi-Weekly (___ 1st/3rd or ___ 2nd/4th) ___ Monthly (___ 1st ___ 2nd ___ 3rd ___ 4th)

Day of the Week Requested: 1st Choice _____ From : _____ (am/pm) To: _____ (am/pm)

2nd Choice _____ From : _____ (am/pm) To: _____ (am/pm)

Date Meetings are to: Begin: _____ End: _____

Would you like to reserve a Storage Cubby?* (Chino and Montrose Only) Yes: _____ No: _____

* Storage Cubbies at Chino and Montrose are available to Service Units and Troops for the Regular Use Year, September-June

Troop/Group Information:

Girl Scout Level: ___ Daisy ___ Brownie ___ Junior ___ Cadette ___ Senior ___ Ambassador

Reason for Meeting: ___ Troop Meeting ___ Service Unit Meeting ___ Training ___ Other _____

Are **all** attending Girl Scout Members? ___ Yes ___ No (If No, please refer to Insurance Requirements and submit required paperwork)

Expected Attendance: Adult _____ Children (Under 18 Years): _____

Responsible Person: Name: _____

Address: _____

City and Zip Code: _____

Phone Number: Home (____) _____ Cell: (____) _____

Email Address: _____

As the person responsible for the meeting, I have read the Guidelines for Use of Girl Scouts of Greater Los Angeles Program Centers and recognize the responsibility that I have to see that care and cleanliness of the building is maintained. When utilizing council properties, please remember to be flexible and exercise the cooperative spirit of the Girl Scouts.

Signature: _____ Date: _____

Note: Reservations are made on a First-Come, First-Served basis and must be complete with fees. Girl Scouts of Greater Los Angeles reserves the right to refuse use of any facility, reschedule, or cancel any reservation at any time. Should your regular meeting date be canceled due to a Council Meeting or Training, you will be notified in advance.

Payment Information:

Cash Check # _____ # _____ Credit: Visa MasterCard Discover Amex

Credit Card #: _____ Exp Date: _____ Signature: _____

Please Deduct from my GSGLA Gift Card

Gift Card# _____ 5 Digit Extension _____ Security Code _____

Site Fee Amt: _____

Security Dep. Amt: _____

For Use by Office Staff

Date Rec'd: _____ Amt Rec'd: _____ Confirmation Sent: _____

Key/ Access Code Sent: _____ Fee Retained: _____ Fee Returned: _____