

GSGLA Troop/Service Unit In-person Meeting/Activity Sign-in Sheet

Meeting Location: _____

Date and Time: _____

This acknowledgement is to be completed for each troop or service unit, and council activity by everyone in attendance (both girls and adults) as it also serves as a roster for your in-person gathering.

	Participant Name	Parent/ Guardian Name (if applicable)	Signature
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Please keep this document for your records.