girl scouts of rhode island **www.gsri.org**

TROOP/GROUP ROSTER

Troop/Group Number	Report Code	Registration Area	Service Unit	Expiration Month	Expiration Year	○ New Troop/Group ○ Re-registering Troop/Group ○ Additions to Troop/Group
				9/30		

Age Level: ○ K-Grade 1 (Daisy) ○ Grade 2-3 (Brownie) ○ Grade 4-5 (Junior) ○ Grade 6-8 (Cadette)
○ Grade 9-10 (Senior) ○ Grade 11-12 (Ambassador) ○ Multi-level

Program Duration *(check one)*: ○ 8-12 months ○ 4-7 months ○ 1-3 months ○ 1-4 weeks

Check the one term that best describes the primary way in which these girls participate:
○ Troop ○ Interest Group ○ Program Center/Facility ○ In School ○ Event ○ Camp ○ Individual ○ Other

Type of Meeting Place: ○ Public Facility ○ Home ○ School ○ Religious Building ○ Other Organization Facility ○ Other

Leader Name _____ Leader Address, City/Town _____ Phone _____ Leader's Email Address _____

_____/_____/_____ _____
Mtg. Day Mtg. Freq. Mtg. Time Meeting Place and Address

(G)irl or (A)dult	Grade or Position Code	Name	Phone Number	National Dues ($12) enter amount	Family Partnership enter amount	Family Partnership (if paid by sister, enter sister's troop)	Total Received	Payment Cash	Payment Check	Payment Credit
			TOTALS (Please total all columns)							

Grades - Enter Total Number of Girls Now Registering In Each Grade													
Pre-K	K	1	2	3	4	5	6	7	8	9	10	11	12

Number of Girls Registering at this time

New (never registered)	+	Re-register	=	Total Girls

Number of Adults Registering at this time

New (never registered)	+	Re-register	=	Total Adults

Service Unit Use
MC/TO Initials:_____
Date:_____

Council Office Use
Receipt #:_____ Date:_____
Total Girls:_____ Total Adults:_____
Dues account#:_____
# of girls FA approved:_____
FP account #:_____
Log: _____

Batch #:_____

◆ White Copy - Council ◆ Yellow Copy - Service Unit