



**Girl Scouts of Central Maryland**  
 4806 Seton Drive  
 Baltimore, MD 21215-3247  
 T (410) 358-9711, (800) 492-2521  
 F (410) 358-9918  
 www.gscm.org

**FOR OFFICE USE**

**REQUEST FOR USE OF  
 COUNCIL-OWNED SITE**

Site \_\_\_\_\_ ID # \_\_\_\_\_  
 Site Report Received \_\_\_ Yes \_\_\_ No

**COMPLETE THIS FORM (PLEASE PRESS HARD) AND MAIL ALL COPIES TO: GIRL SCOUTS OF CENTRAL MARYLAND, 4806 SETON DRIVE, BALTIMORE, MD 21215. A copy will be returned to you with your confirmation.**

**FOR CAMPING DATES DURING:      RESERVATIONS MUST BE POSTMARKED ON OR AFTER:**

January - April 30  
 May - August 31  
 September - December 31

September 1  
 January 2  
 May 1

**OVERNIGHT CAMPING/DAY USE:** Applications are handled in the order in which they are received for each camping period. Each application must be accompanied by a \$25.00 security deposit. If none of the choices selected can be granted, the deposit will be refunded. Cancellations must be made no later than FOUR weeks prior to camping date or the fee is forfeited. Refunds are given only under conditions stated in the Guide To Council Properties. Fees are due **SIX** weeks prior to camping date.

Troop/Group# \_\_\_\_\_ Service Unit# \_\_\_\_\_ County \_\_\_\_\_  
 Program Age Level (Check) Da Br Jr Cd Sr Adult [ ] Non-Girl Scout/out-of-council Trp/Grp

Leader Name \_\_\_\_\_ I.D.# \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ ZipCode \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Last Date the Troop or Group Camped \_\_\_\_\_

Adult certified in Troop or Group Camping \_\_\_\_\_ Phone# \_\_\_\_\_

Adult certified in First Aid \_\_\_\_\_ Phone# \_\_\_\_\_

Camp	First Choice:	Second Choice:
Unit	1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____	1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____
Date	1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____	# Participating: ____ Women    ____ Girls ____ Men        ____ Boys
To Be Used For	___ Overnight Camping ___ Day Use	___ Training ___ Meeting ___ Other

Deposit Enclosed \$ \_\_\_\_\_

**I CERTIFY THAT THIS EVENT MEETS SAFETY-WISE AND GSCM POLICIES AND STANDARDS.**

Signature of Adult-In-Charge \_\_\_\_\_

07-118  
07/02