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 Phone : +81 (0) 3-3460-0701 Fax : +81 (0) 3-3460-9383(JR)  
<http://www.girlscout.or.jp> E-mail : [gstj@girlscout.or.jp](mailto:gstj@girlscout.or.jp)

## Application Form

Please TYPE or use BLOCK LETTERS. Please return this form **no later than the end of March 2010**. It is highly recommended to send it by fax or e-mail in advance.

**Name of Member Organization:** .....

Name (Please underline surname): .....

Date of Birth: ..... (Age)..... Gender: .....

Mailing Address: .....

Telephone: ..... Fax: .....

E-mail: .....

Section in Girl Scouting: .....

(e.g. Senior / Ranger / Adult Leader)

Contact person in emergency: .

- Name .....
- Relationship .....
- Fax .....
- Tel .....
- E-mail .....

Religion: .....

Diet requirements: .....

Allergic to: .....

Any medical treatment at present: .....

Any long term or previous injury that may re-occur during the Camp: .....

Height: .....cm Weight: .....kg Blood type: .....

*If you are 18 years or under, please ask a parent/guardian to sign the following:  
 I consent to my child taking part in outdoor activities and I acknowledge that as a result of those risks, injuries may be sustained from time to time. I agree that in the event of illness or injury requiring hospitalization, Girl Scouts of Japan will act on my behalf and make the necessary arrangements. I also understand that I may be asked to assist with the associated travel/medical costs incurred*

Signature of parent/guardian .....

*I confirm the correctness of all data with my signature.*

Signature of applicant .....

girls worldwide say   
**“build a better world”**  
 Girl Scouts of Japan  
 Celebrate 90 years of Girl Scouting in Japan  
 2010, the year for Girl Scouts



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## Group Registration Form

Please TYPE or use BLOCK LETTERS. Please return this form no later than the end of March 2010. It is highly recommended to send it by fax or e-mail in advance.

**Name of Member Organization:** .....

**Name of Group:** .....

**Mailing Address:** .....

**Tel:** ..... **Fax:** .....

**E-mail:** .....

**Total Number of Participants:**

- Girls: .....
- Leaders: (F)..... (M) .....

**Responsible Contact Person:**

**Name:** .....

**Position in Girl Guiding & Scouting:** .....

**Mailing Address:** .....

**Tel:** ..... **Fax:** .....

**E-mail:** .....

**Contingent Leader:**

**Name:** .....

**Position in Girl Guiding & Scouting:** .....

**Mailing Address:** .....

**Tel:** ..... **Fax:** .....

**E-mail:** .....

  
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