



Council Authorization to Participate in QuestFest 2017

TEAM NAME (as specified on registration) _____

TEAM CONTACT INFORMATION:

_____ (name) _____ (email) _____ (phone)

Please list the full names of all QuestFest participants on your team or in your group:

| NAME | GIRL or ADULT (circle) | AGE (for girls only) |
|-------------|-------------------------------|-----------------------------|
| 1. _____ | GIRL ADULT | _____ |
| 2. _____ | GIRL ADULT | _____ |
| 3. _____ | GIRL ADULT | _____ |
| 4. _____ | GIRL ADULT | _____ |
| 5. _____ | GIRL ADULT | _____ |
| 6. _____ | GIRL ADULT | _____ |
| 7. _____ | GIRL ADULT | _____ |
| 8. _____ | GIRL ADULT | _____ |
| 9. _____ | GIRL ADULT | _____ |
| 10. _____ | GIRL ADULT | _____ |
| 11. _____ | GIRL ADULT | _____ |
| 12. _____ | GIRL ADULT | _____ |
| 13. _____ | GIRL ADULT | _____ |
| 14. _____ | GIRL ADULT | _____ |
| 15. _____ | GIRL ADULT | _____ |

To be filled out by Council Staff Member:

Council Name _____

Council Address _____

Council Phone Number _____ Council Email _____

Council TIN # _____

I certify that all participants listed above are registered with this Girl Scout Council.

In the event that this QuestFest team wins a cash prize, our Council agrees to distribute the team's half of the prize money evenly among the troops of all participants in a timely manner.

_____ (name) _____ (title) _____ (signature) _____ (date)