

WELCOME TO TROOP FL3946!

Please scan the following QR code to register yourself with AHGfamily. Once you complete this form, you will be able to login and register your girl.



<https://www.ahgfamily.org/register/tkkljahmngnx>

The following must be complete before attending the first meeting on April 16th at 6pm:

- Register your family with AHG and pay the \$40 annual dues
- Complete Health and Medical Form. There is an option to be exempt from providing vaccination status.
- Complete media release form
- Have your child read and sign the Girl's Behavior Agreement
- Please bring cash or check with \$10 summer dues to the meeting. If you are unable to or need assistance please contact us at AHGTroop3946 @ gmail.com

Each year, AHG Girl and Adult Members must complete a new *Health and Medical Form* to be kept on file at the Troop level.

Attaching a photo to this form can help to avoid errors in identification.

Member Name			
Date of birth		Age	
Weight		Height	
Street Address			
City, State Zip			
Parent/Guardian Name(s)			
Phone Number(s)			
Emergency Contacts	Name		
	Relationship		
	Phone Number		
	Name		
	Relationship		
	Phone Number		
Allergies: If applicable, please list all known allergies including medications, food, and environment.	Allergy	Normal reaction and management of reaction	
General Health Information: Check all that apply, past or present, to this member's health history.	<input type="checkbox"/> Abdominal/stomach/digestive problems <input type="checkbox"/> Asthma <input type="checkbox"/> Convulsions/seizures <input type="checkbox"/> COPD <input type="checkbox"/> Diabetes <input type="checkbox"/> Excessive fatigue <input type="checkbox"/> Fainting or dizziness <input type="checkbox"/> Head injury/concussion <input type="checkbox"/> Heart disease/heart attack/chest pain/heart murmur/coronary artery disease <input type="checkbox"/> Hemophilia or blood disorders <input type="checkbox"/> Hypertension (high blood pressure)	<input type="checkbox"/> Kidney Disease <input type="checkbox"/> Lung/respiratory disease <input type="checkbox"/> Menstrual cramps <input type="checkbox"/> Migraines/headaches <input type="checkbox"/> Motion/altitude sickness <input type="checkbox"/> Muscular/skeletal conditions/muscle or bone issues <input type="checkbox"/> Neurological disorders <input type="checkbox"/> Nosebleeds <input type="checkbox"/> Sinus problems <input type="checkbox"/> Sleep apnea, sleepwalking or sleep disorders <input type="checkbox"/> Stroke/TIA <input type="checkbox"/> Thyroid disease	

Member Name					Troop Number	FL3946
Additional notes about this member's behavior, physical, emotional or mental health needs pertinent to their participation in American Heritage Girls.						
Medications: If medications of any type will be taken or needed during Troop meetings, events, activities or trips, please fill out the <i>Request for Medication Administration Form</i> .	<input type="checkbox"/> No medications are routinely taken. <input type="checkbox"/> The medications listed below are regularly taken (including inhalers, Epi-Pens, over the counter medications, homeopathic, and prescription medications). If additional lines are needed, please attach a separate page.					
	Medication	Dosage		Reason for medication		
Tetanus Immunization Policy: AHG requires members to have Tetanus immunization within the last 10 years.	<input type="checkbox"/> I (or my daughter) has received tetanus immunization on _____(date). <input type="checkbox"/> I (or my daughter) have not received tetanus immunization and I would like to request exemption based upon a lack of immunization records, religious, philosophical or medical grounds. Signature of individual or parent/guardian: _____					
Immunizations: The following immunizations are recommended by AHG, Inc. but are not required.	Type	Year Received	Type	Year Received	Type	Year Received
	Pertussis		Polio		Hepatitis B	
	Diphtheria		Chicken pox		Meningitis	
	MMR		Hepatitis A		Influenza	
I give permission for full participation in American Heritage Girls programs, events and activities, subject to limitations noted herein. I know of no health reason(s), other than the information indicated in this form, why I or my daughter should not participate in any of the American Heritage Girls activities. Please check one: <input type="checkbox"/> In case of an emergency, I understand every effort will be made to contact me (or my next of kin). In the event that contact cannot be made, I hereby give my permission to the licensed health-care provider selected by my Troop or Charter Organization to secure proper treatment, including related transportation, hospitalization, anesthesia, surgery, or injections of medication for myself or my child, except as noted. I agree to the release of records necessary for treatment. <input type="checkbox"/> I do not give my consent for medical treatment of my daughter or I. In the event of illness or injury requiring treatment, I wish AHG volunteers to take no action beyond basic first-aid measures						
Additional notes:						
Signature of individual or parent/guardian					Date	

Girl Behavior Agreement

Purpose

To clarify behavior expectations of Girl Members consistent with AHG's Oath, Creed, Policies and Guidelines.

Girl Behavior Agreement

As an American Heritage Girl, in this Troop, I agree to:

- Live out and uphold the AHG Oath and Creed
- Use language appropriate for a Christian community
- Respect the rights, privacy and property of others
- Wear appropriate and modest clothes for activities
- Not possess or use weapons, tobacco, alcohol, or any illegal substance or paraphernalia (including vaping, juuling, etc.)

Zero Tolerance Policy

A zero-tolerance policy has been adopted by this American Heritage Girls Troop for the following behaviors:

- Possession or use of weapons, tobacco, alcohol, or any illegal substance or paraphernalia
- Theft
- Physical assault
- Sexually inappropriate behavior or talk
- Openly, actively and without repentance influencing other Girl Members to engage in activity in conflict with Biblical truth (including, but not limited to, any redefinition of biological sex and associated gender pronouns)

Examples of appropriate and inappropriate behaviors:

Appropriate

- Handshake and high-fives
- Arm around the shoulders
- Pats on the head/shoulder/back
- Verbal praise for achievement or behavior
- Verbal encouragement
- Scripturally based teaching

Inappropriate

- Private massages
- Aggressive touch (hitting, kicking)
- Kissing
- Lap Sitting
- Compliments or questions relating to physique or body development
- Sexual jokes, innuendoes, or conversation
- Swearing, profanity, or vulgar language
- Harassment, bullying, ridicule, excessive teasing, or lying

Please sign below that you have read and agree to this behavior agreement.

Girl Signature _____

Parent Signature _____

Date _____ Troop Number FL3946

**By signing this agreement, parents agree to immediately pick up their daughter upon notification if any of the behaviors noted in the Zero Tolerance Policy have been exhibited.*

Fee SCHEDULE

The following is a breakdown of initial and annual costs. These costs are subject to change.

2023-2024 TROOP YEAR

April 16- \$40 annual troop membership fee paid to AHG (covers insurance costs)
\$10 Troop dues (covers troop activities)

2024-2025 TROOP YEAR

August- \$50 Troop dues (includes badges and handbook)
(Exception: \$25 Pathfinder Troop dues)

September 29- \$40 (annual troop membership fee paid to AHG)

OTHER EXPENSES

Girl Class A Uniform- Cost dependent upon girl level (see below)

Special Events- Most events will be covered through fundraising. On occasion a special event may have an additional fee.

Adult Member Fee- For parents who choose to volunteer or who would like to camp with the Troop. \$40 (annual troop membership fee paid to AHG)

Fundraisers

Fundraisers are used to offset costs of troop activities and service projects. The troop will participate in 3 fundraisers a year. All girls are expected to participate.

GIRL'S UNIFORM GUIDE

Unit	Uniform	Cost
Pathfinder	Shirt and Necklace	\$24.24
Tenderheart	Vest Package (White polo not included)	\$35.64
Explorer	Vest Package (White polo not included)	\$35.64
Pioneer	Sash Package (White polo not included)	\$17.15
Patriot	Sash Package (Red polo not included)	\$17.15

AHG branded polos can be purchased for \$26.99. You may also purchase a generic polo of your choice.



Includes: Interview statements, Written Testimonials, Photographs, Video, Vocal Recordings

I authorize this release based on the following conditions:

1. These records become the property of American Heritage Girls, Inc. (AHG)
2. This release is given without promise or compensation.
3. This release is effective until terminated by a retraction in writing from the person granting the authorization.
4. A release is given to AHG, Inc. to any right, title and/or interest of any kind that the person granting the release may have in the records produced.

I hereby grant to American Heritage Girls, Inc. the right and authority to print, record, and share my statement, photograph, video recording or vocal recording. These records may be used for promotional or publicity purposes and may be published in mass media publications, AHG publications, AHG print and digital marketing materials, AHG websites, or shown on television or movie presentations. The release is effective until revoked in writing by the undersigned. Such revocation shall only be effective to prevent any expanded future use of the records.

I further release AHG, Inc., and its representatives from any liabilities, known or unknown, arising out of the use of this material.

By signature below, I acknowledge and accept all terms and conditions of this Media Release Agreement. If I am signing this Media Release Agreement on behalf of a minor, I certify that all representations are true and that I am the minor's legal guardian or custodial parent with full authority to bind the minor and myself to the terms and conditions of this Release Agreement.

I certify that I have read this Media Release Agreement and fully understand its terms and conditions.

I DO authorize this written content, photographic, video, or vocal recording media release.

I do NOT authorize this written content, photographic, video, or vocal recording media release.

Name/phone-number

Date

Signature

FL3946

Troop#



Adult Leader Survey Form

Please fill out this survey form and hand in before leaving tonight if you would consider volunteering for a leadership position and/or as a resource for the Troop.

Name: _____ Phone: _____

Address: _____

Email: _____ ; _____

Occupation: _____ Position: _____

I would like to help in one of the following leadership Areas:

American Heritage Girl Troop

	Troop Board (Troop Coordinator, Asst. Troop Coordinator, Treasurer, Shepard, Other Board Positions) also Fundraising, Advancement, Communications, Membership, etc. (Circle your choice.) Positions also
	Pathfinders – 5 year old's
	Tenderheart – 1 st to 3 rd Grade
	Explorer – 4 th to 6 th Grade
	Pioneer – 7 th to 8 th Grades
	Patriot – 9 th to 12 th Grades

Hobbies and Skills

	Backpacking		Leatherwork		Fishing		Public Speaking
	Ball/Sports		Diving/Swimming		Orienteering		Snow Skiing
	Camping		Equestrian		Photography		Water Activities
	Canoe/Kayak		First Aid		Promoting		Shooting Sports
	Caving		Climbing		Scuba Diving		Training
	Cooking		Equestrian		Fitness		Web & Programming

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Program Assistance

Transportation. I have a:	Project Assistance: I have:
Pickup Truck	Power Tools, etc.
Van	Wheelbarrow, etc.
Enclosed Cargo Trailer	Utility trailer
Boat/Watercraft/Kayak/Canoe	Hand tools, etc.

I can help with Fund-raising.	I can help with Membership.
I can help with Projects.	I can help with Training.
I can help with Health, Safety & First Aid.	I can help with Advancement.
I can help with Web and Social Media.	I can help with Equipment.
I can help with Outdoors and Activities	I can help with Camping.
I can help with Administrative Paperwork.	I can help with Special Needs Children.
I can help with _____ _____	I can help with _____ _____

Additional areas I would be able to help the Troop(s):