

Product Program Volunteer Responsibility Agreement

Is this form for you?

YES: You are a registered Volunteer that handles **Troop** Product and/or **Troop** Product Money.

NO: You are working with **just** your Girl Scout with Product Program money and Product.

Volunteer Responsibilities: To manage and coordinate the Product Program with your Troop while providing support to the caregivers and Girl Scouts in your Troop.

- Attend Product Program Training for Fall Product and the Cookie Program.
 - Training materials can be found at gsnim.org, Cookies+ tab.
 - Training videos may be accessed via gsLearn from gsnim.org, myGS tab.
- Ensure that participating Girl Scouts are registered before the Program starts.
- Have a caregiver sign the Girl Scout Responsibility Agreement before distributing sale supplies.
- Have a caregiver sign a product receipt when picking up product or giving money to the Troop. Please always count together!
- Collect money from a caregiver before distributing additional products. Participants should never owe for more than **40 packages** of cookies at a time.
- Keep accurate records of all transactions for 2 years.
- Make Fall Product payments into a Council Bank account and email a deposit copy to frontdesk@gsnim.org.
- Make Cookie Program deposits into a Council bank account. Reference training materials for deposit procedures.
- Acquiring additional Product quantities may be reduced if deposit slips are not brought to a cookie pickup.
- Caregivers with an outstanding balance need submitted to Council as delinquent within seven days of last sale date. Any outstanding balance exceeding the value of 40 packages will be the responsibility of the troop.
- I understand that money from any Product Program sale is not mine and must be deposited in a troop/Council account by posted due date.

GSNI-M will withhold rewards from Girl Scouts in troops with an outstanding balance until paid. Caregivers may submit receipts showing proof of payment to acquire rewards. Continued outstanding balance may result in either restricted use of funds or release from volunteer status. If volunteer is transferred to collections, a \$35.00 fee plus troop profit will be added to balance owed.

_____ (initial) I agree that in the event my outstanding balance is referred to an attorney for collection, I will be responsible for all cost of collection, as stated above, plus reasonable attorney fees.

Name _____ Email _____

Address _____ City _____ State _____ Zip _____

Phone _____ Place of Employment _____

Printed Name _____ Troop # _____

Signature _____ Date _____



girlscouts
of northern indiana-
michiana

Girl Scout Product Program Responsibility Agreement Troop # _____ Year 20 _____

I acknowledge that my Girl Scout has permission to participate in the Girl Scout Fall Product and Cookie Program and that I am financially responsible for all product and money received.

| Girl Scout Name | Caregiver Printed Name | Caregiver Signature | Relationship to GS | Date |
|-----------------|------------------------|---------------------|--------------------|------|
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Please have a caregiver for each participating Girl Scout sign this form and keep with troop records for the remainder of the current Girl Scout year.
For delinquent families, submit this form along with remaining required documents to frontdesk@gsnim.org.