

## AHG REGISTRATION CHECKLIST (one per girl)

GIRL NAME: \_\_\_\_\_

GRADE IN FALL: \_\_\_\_\_

AGE IN FALL: \_\_\_\_\_

### FORMS TO SUBMIT:

- ☐ AHG REGISTRATION CHECKLIST
- ☐ HEALTH AND MEDICAL HISTORY FORM
- ☐ TROOP TRANSPORT FORM
- ☐ TROOP MEETING PERMISSION SLIP
- ☐ SIGNED COPY OF AHG STATEMENT OF FAITH
- ☐ PARENT INTEREST FORM
- ☐ CHECK MADE OUT TO "CCUPC" FOR LOCAL DUES
  - 1 girl - \$35
  - 2 girls - \$45
  - 3 or more girls - \$55
  - discount applies to multiple girls in same household only

### Please note:

The *High Adventure Medical Form* is not required for registration, but is required for most outdoor activities, including camping trips. Have this form completed by your child's physician at your next office visit and submit it to us right away.

### Send all forms and payment to:

Julie Kerr - AHG PA1606  
139 Dorsch Drive  
Cranberry Twp, PA 16066