



Plan 2 Enrollment Form for USA Girl Scouts Overseas



1. Submit the completed enrollment form through the Director, USAGSO, Girl Scouts of the USA, 420 5th Avenue, New York, NY 10018-2798
2. Enrollment form and premium must be received by Mutual of Omaha prior to 12:01 a.m. of the first day of the Girl Scout international trip.

FROM: Location _____
 Address _____
 City _____ State _____ ZIP _____
 Telephone _____
 Fax _____

(Please complete the address portion in full. This will be used to return the Headquarter's verification copy.)

USAGSO approval is required—forms without the appropriate USAGSO signature cannot be processed; group leaders should not submit enrollments directly to Mutual of Omaha companies.

Country and Location Code No. **7** _____
8 _____

USAGSO name submitting this form _____

Please provide Accident and Sickness Insurance to cover all enrolled participants in the following approved, supervised Girl Scout trip (except statutory employees covered under workers' compensation):

Schedule of Each Event

			(1)	(2)	(3)	(4)	(5)
Name and Location of Event	Beginning Date	Ending Date	Number of Participants	Number of Days	Number of Participant Days (1 x 2)	Premium Each Day @ 11¢	Total (3 x 4)
SAMPLE: JULIETTE LOW CAMP FIRE - Hong Kong	1/20/XX	1/24/XX	30	5	150	\$0.11	\$16.50
1.							
2.							
3.							
4.							
5.							
TOTAL	N/A	N/A					

Enclosed is a check for the TOTAL PREMIUM shown above, made payable to UNITED OF OMAHA LIFE INSURANCE COMPANY. More than one event may be submitted per enrollment form. MINIMUM PREMIUM is \$5.00 per enrollment form.

Director or USA Girl Scouts Overseas Signature _____ Date _____

FOR HOME OFFICE USE ONLY

Verification of Coverage to GSUSA	SGS20
Approved as Submitted _____ / ____ / ____ <small style="text-align: center;">Signature Date</small>	Approved with Change Marked _____ / ____ / ____ <small style="text-align: center;">Signature Date</small>