

INDIVIDUAL GIRL'S RECORD

(This record is kept by the leader, or assistant leader, and will help a leader become better acquainted with individual girls in her troop.)

(Most of the information for this section may be copied from the girl's application or parent consent form.)

Name Moss Margaret Date of birth Nov. 16 47
 (Month) (Year)
 Address Hensmen 24 apt. 4 Telephone number 482-780
 Changed address _____ Telephone number _____
 Changed address _____ Telephone number _____
 Father's name James P Moss - 1922 AACS - APO 131 N.Y.
 Mother's name Mary Ann Moss
 *Brothers at home: Number _____ Ages _____ Sisters at home: Number 1 Ages 4
 *Membership in other clubs or recreational groups _____
 *Instruction, if any, outside of school (Music, dancing, etc.) _____

 Any health condition that might limit or affect participation in the troop activities _____

 If not attending school, explain _____
 Other information about the girl _____

REGISTRATION RECORD**

(Most of this information may be copied from the Troop and Troop Committee Registration Form.)

REGISTRATION DATE	EXPIRATION DATE	TYPE OF REGISTRATION***	TROOP NUMBER	PROGRAM LEVEL	SCHOOL		AGE	DATE OF LAST HEALTH EXAMINATION
					NAME	GRADE		
<u>Oct 1955</u>	<u>Oct 1956</u>	<u>new</u>	<u>409</u>		<u>Munich Amer. Germany</u>	<u>2nd</u>	<u>7</u>	
<u>Dec 1956</u>	<u>Dec 1956</u>	<u>Re-reg</u>	<u>216</u>		<u>" "</u>	<u>4th</u>	<u>9</u>	

Reason for leaving Girl Scouting _____ Date _____

CAMP RECORD

(Most of this information should be secured from the girl.)

YEAR	NAME OR TYPE † OF CAMP	TOTAL DAYS ATT'D.	REMARKS

* At time of first registration.

** The entries for this registration record should correspond to the entries made on the Troop and Troop Committee Registration Form.

*** The entries in this column should be the same as the information reported on the Troop and Troop Committee Registration Form in the new, reregistration (in same or different type of membership), and transfer columns.

† Established, troop, day, or trip camp.

IMPORTANT

This record, or a copy of it, should be transferred from one leader to another as the leadership of the troop changes, from one troop to another as the girl to whom the record applies transfers from one troop to another, and from the leader to the council (if there is one) when the girl drops out of Girl Scouting.

(Over)

GIRL SCOUT APPLICATION

Name M. Margaret Moss Birthdate 11-16-47

Home Address 24 Herkomerstr. apt #4

Home Telephone No. 482780

Munich Address _____

Munich Telephone Number _____

Are you a member of a Troop now? _____

Where? _____ Troop No. _____

Expiration date of registration: _____

Number of years in Scouting NONE

Number of brothers _____ Ages _____

Number of sisters 1 Ages 4

Name of Mother MARY ANNE MOSS

Name of Father JAMES P. MOSS

Special Interests: _____

Hobbies: _____

I want my daughter to become a member of the Girl Scouts of America.

Signature Mrs. James P. Moss

Retention date: 2-15-58

SMUAG-34 22 Dec 54 (Temporary)