

STEP 1: Register as a lifetime member (all fields required)

| Lifetime member name (please print) | | | | | | |
|--|--|----------------|------------------------|---|--------------|--|
| Address | | | | | | |
| City | State | Zip | - | Telephone | Email | |
| _ | he following only if r within past five y | _ | is currer | atly registered | as an annual | |
| GSUSA ID number (if known) | | | Council name | | | |
| If this lifet | yment information ime membership is ble, all fields requir | a GIFT, comple | ete the fo | ollowing: | | |
| Your name | (please print) | | | | | |
| Address | | | | | | |
| City | State | Zip | Zip Telephone Email | | | |
| I wish to purchase (check one): □ \$400 ADULT (Women and Men Ages 18 or Older) □ \$200 YOUNG ALUM (Former Girl Scout Ages 18-29) | | | | | | |
| • | ype (check one): | | □ Choo | le | . Ordor | |
| □ AmEx | □ MasterCard | □ Visa | □ Chec | k □ Money | Order | |
| Account number | | | - | Register at girlscouts.org/lifetime , mail this form to your local council or send to: | | |
| CVV | Expiration date | | Girl Scouts of the USA | | | |
| Name as it appears on the card (please print) | | | | Lifetime Membership PO Box 5048 New York, NY 10087-5048 | | |
| Signature | | | | | V104152019 | |