

GIRL SCOUTS

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

Lifetime member name (please print)				Date of Birth			
Address							
City	State	Zip		Phon	е	Email	
-	he following only is Ir has been within t			-	registere	d as an annual	
GSUSA ID number (if known)				Council name			
Please com	nplete only if the ap	oplicant is a g	gradu	ating Girl	Scout Se	enior.	
 Month/yea	r of high school (or	equivalent)	gradu	ıation			
If this lifet (if applical	ovide your payment ime membership is ble, all fields require (please print)	s a gift, comp		he followi	ng		
Address							
City	State	Zip		Phon	е	Email	
□ \$400 ADI	ourchase (check or ULT (women and m UNG ALUM (Girl Sco ayment type (chec	en ages 18 or out alum ages	18-2		□ Mone	ey order	
Account number				Paying by credit card? Email the completed form to: customercare@gsmw.org			
CVV  Name as it	Expiration date  e as it appears on the card (please print)			Paying by check? Mail the completed form and check to: Girl Scouts of Montana and Wyoming 2303 Grand Ave Billings, MT 59102			
				Questions? Call Customer Care at 800-736-5243			
Signature							