



Girl Scouts - Sybaquay Council
 12N124 Coombs Road
 Elgin, IL 60124
 Ph. 847-741-5521
 Fax 847-741-5667

Troop/Group Partnership Agreement

_____ has agreed to partner with
 (Please print name of partnering organization.)

_____ from _____ for the year of _____
 (level and number of troop/group) (service unit)

_____ will work with _____
 (Please print the organization's representative.) (Please print name of troop/group representative.)

to fulfill the responsibilities of this agreement.

The partnering organization agrees with the basic beliefs of Girl Scouting as embodied in the Girl Scout Promise and Law, to adhere to national and local Girl Scout policies, and to be guided by national and local Girl Scout standards in its relationship with this troop/group.

In addition, the organization should review the following list with the troop/group representative to determine which are needs of the troop/group and which the organization can help fill. These are not required activities, but provide a guideline to the organization as to appropriate activities.

- Provide opportunities for service.
- Provide or assist with finding an appropriate meeting space.
- Suggest names of qualified adults to assist with the program.
- Provide program materials and equipment.
- Provide use of office machinery for paperwork.
- Support council and troop/group money earning efforts.
- Have a representative register with the troop/group.
- Provide window space for Girl Scout Week and other displays.
- Publicize Girl Scout happenings in the organization's newsletter.
- Other ideas: _____

Girl Scouts - Sybaquay Council retains the right to place girls in the troop/group, to appoint and direct the adult volunteers associated with the troop/group, and to monitor the troop/group activities.

Girl Scouts - Sybaquay Council, through the leadership team, will:

- Keep the partnering organization informed of the troop/group activities and needs.
- Encourage the troop/group to participate in appropriate projects of the partner.

The troop/group also agrees to do the following for the partner:

- _____
- _____

This agreement will remain in effect for one year. Girl Scouts - Sybaquay Council and the partnering organization have the privilege of dissolving their agreement upon notification of the other party.

Partner organization _____

Address _____

City _____ State _____ Zip _____

Signature of organization's representative _____ Date _____

Signature of troop/group representative _____ Date _____

Signature of council representative _____ Date _____

May we use your name/your organization's name in press releases? Yes No

The partnering organization will receive a thank you letter, window decal, copy of this agreement and recognition in the council's annual report. The troop/group will receive a ribbon and a copy of this agreement.

www.gs-sybaquay.org