



DISBANDING A TROOP FORM

Date completed: _____ / _____ / _____
Month Day Year

Service Unit Name and Number: _____

Troop #: _____ Age Level: Daisy Brownie Junior Cadette Senior Ambassador

Previous Leader: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Previous Assistant Leader: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Reasons for Disbanding of Troop: _____

Date Troop was Disbanded: _____ Amount in Troop Treasury: \$ _____

Location of Funds: _____

Troop/Group Records: _____ (Date) Troop Property: _____ (Date)

Troop Treasury: _____ was turned over to service unit manager or Girl Scouts Office. (Date)

Date Troop Financial Report completed: _____

SIGNED (AT LEAST TWO SIGNATURES PLEASE):

Service Unit Registrar: _____

Previous Troop/Group Leader: _____

Membership Recruiter: _____

Troop/Group Consultant or Organizer: _____

Service Unit Manager: _____

Membership Extension Specialist: _____

* This form is to be completed for all troops which will not re-register by March. The council membership registration clerk will identify troops as disbanded and give this form to the membership extension specialist for follow up. Please give the forms to the service unit manager, who will then forward to the Regional Office.

Pink - service unit manager

White - membership extension specialist

Yellow - service unit membership registrar