

COOKIE COSTUME RENTAL REQUEST FORM

Complete the following:

Contact Person _____ Troop # _____

Address _____ Service Area _____

City/State/Zip _____ Email Address _____

Phone: Day (____) _____ Evening (____) _____ Cell (____) _____

Pick-up Date _____ Return Date _____ Service Center _____

I agree and/or understand the following:

- Cookie Costume availability is on a first-requested, first-served basis.
- To follow all conditions detailed in the Cookie Costume Rental Policy.
- Completing the "Cookie Costume Rental Request Form" does not guarantee rental or usage of any Cookie Costumes.

Signature _____ Date _____

Return completed form to:

Email: productprograms@gsnwgl.org

Fax: 920.734.1304

Mail: GSNWGL
Attn: Product Program Department
P.O. Box 9427
Green Bay, WI 54308

Once form is received, requesting troop will receive an email confirming or denying Cookie Costume usage. If a modification is needed you will be contacted via phone or email. Cookie Costumes will be able to be picked up at time and place stated in the email confirmation. Rental fees are to be paid upon pick up.

FOR OFFICE USE

Rental Reservation:

____ Confirmed Date Email Sent _____

____ Denied Reason _____ Date Email Sent _____

____ Modified To _____ Reason _____ Date Email Sent _____

of Costumes Requested _____ x # of Rental Periods at _____ x \$4.00 = _____ Total Rental Fees

Date Returned _____ Condition Returned _____

Late Fees Assessed _____ Damage Fees Assessed _____ Date Fee Letter Sent _____