



Republic of the Philippines
Department of Education
Region VI – Western Visayas
SCHOOLS DIVISION OF CAPIZ

Division Advisory No. 006, s. 2026

February 4, 2026

In compliance with DepEd Order (DO) No. 8, s. 2013

This advisory is issued not for endorsement per DO 28, s. 2001, but only for the information of DepEd Capiz officials, personnel/staff, as well as the concerned public.

(Visit www.deped.gov.ph)

Attached is the Girl Scouts of the Philippines Capiz Council Local Circular No. 04, s. 2026 titled **Regional Senior and Cadet Conference 2026** on March 6-8, 2026.

Participation to this activity is voluntary and subject to compliance with DepEd Order No. 012, s. 2025 titled **Multi-Year Implementing Guidelines on the School Calendar and Activities**, DepEd Order 09, s. 2005 titled **Instituting Measures to Increase Engaged Time-on-Task and Ensuring Compliance Therewith**, DepEd Order No. 008, s. 2023 titled **Participation of Teachers in Volunteer Work and Extra Curricular Activities**, DepEd Memorandum No. 041, s. 2024 titled **Reiteration of the “No Collection Policy” in Schools**, and DepEd Order No. 66, s. 2017 titled **Implementing Guidelines on the Conduct of Off-Campus Activities**. The details and overview of this program are attached for reference.

For more information and verification, contact:

SEGUNDINA F. DOLLETE, EdD

Council President

Girl Scouts of the Philippines

Capiz Council



Address: Banica, Roxas City

Contact Number: (036) 6518 456/0968-869-5867

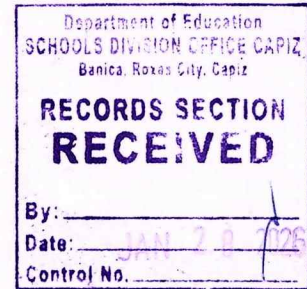
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GIRL SCOUTS OF THE PHILIPPINES

Visayas Region
Capiz Girl Scout Council



Local Circular No. 04

Series 2026

TO: INTEGRATED/SECONDARY/NATIONAL HIGH SCHOOLS, PRINCIPALS/HEADS OF PRIVATE SCHOOLS/UNIVERSITIES/ CHED, SECONDARY GIRL SCOUT COORDINATORS, PDO - YOUTH FORMATION OF CAPIZ DIVISION SDO & ROXAS CITY SDO, TROOP LEADERS' REPRESENTATIVE TO THE COUNCIL BOARD, SENIOR AND CADET GIRL SCOUTS

RE: REGIONAL SENIOR AND CADET CONFERENCE 2026

DATE: January 23, 2026

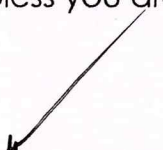
Dear Sir/Madam,

Greetings!

Please be informed that there will be a Regional Senior and Cadet Conference 2026 on **March 6-8, 2026**, at the Marina Yulo-Vargas Regional Program and Training Center, Kalunasan, Cebu City.

Attached are the VRO Circular No. 1 s2026, Event Required Forms: Application, Parent Consent, Information and Health Forms for reference and dissemination.

Thank you very much and God bless you always.


SEGUNDINA F. DOLLETE, EdD
Council President



GIRL SCOUTS OF THE PHILIPPINES

Visayas Region

VRO Circular No. 1
Series 2026

TO : COUNCIL PRESIDENTS AND EXECUTIVES
FROM : REGIONAL EXECUTIVE DIRECTOR
RE : REGIONAL SENIOR AND CADET CONFERENCE 2026
DATE : JANUARY 22, 2026

Greetings! This is to notify everyone of the schedule of the Visayas Regional Senior and Cadet Conference to be held on March 6-8, 2026 at the Marina Yulo-Vargas Regional Program and Training Center (RPTC), Barangay Kalunasan, Cebu City.

Please take note of the details below:

Event : Visayas Regional Senior and Cadet Conference
Date & Venue : March 6-8, 2026
Marina Yulo-Vargas RPTC
Participants : Eight(8) to twelve (12) Senior/Cadet Girl Scouts per Council who are registered as of March 2025, preferably members of the Senior Planning Board.
Registration Fee : Php 4,500 per participant to cover food, accommodation, program materials, souvenirs and tour (includes Ocean Park)

The first meal will be dinner of March 5, 2026, and the last meal will be breakfast of March 9, 2026. Participants who will arrive earlier or extend their stay at the center shall be charged for food at the following rates:

Breakfast	Php 150.00	Snacks	Php 75.00
Lunch	Php 200.00	Dinner	Php 200.00
Things to bring	Two (2) sets of GSP Dress Uniform Closed Black Shoes GSP White T-Shirt & Fun T-Shirt GSP Jogging Pants Physical Fitness Outfit Semi-Formal Dress		
	Rain Coat/Umbrella Writing Pad & Pen Medical Certificate Parents's Consent Personal Medicines Camera (Optional)		

The Conference will be managed by the Working Committee headed by the Visayas Regional Girl Representative to the Central Board, Cdt. GS Ajeleth A. Yatar and her Alternate, Cdt. GS Abigail C. Bulalagje together with the following Girl Leaders/SPB Chairman: Cdt. GS Michaela Gyle Molero (Neg. Or.-Siq.), Cdt. GS Viel Antoni Alboro (Samar), Cdt. GS Christie Tajale (Bohol) and Cdt. GS Alessandra Gingoyon (Cebu).

In view thereof, may we request that the above-mentioned Girls who will be serving as Members of the Working Committee to be present at VRO on March 5, 2026 for the Planning/ Organizational Meeting in preparation for the said Conference.

Councils may charge the registration fees of their participants to the Program & Training Development Grant (PTDG), subject to the availability of funds.

Enclosed herewith are the Application, Health Forms, Parent Consent and Reply Slip which are expected to be submitted to the VRO on or before **February 20, 2026**, to allow sufficient time for the preparation of the program materials and souvenirs. Participants are also required to accomplish the registration link provided below.

REGISTRATION LINK: <https://forms.gle/RTEPukbA5xqxr8Gu5>

We look forward to a 100% attendance of the councils to this event.

For your information and appropriate action.


MARY ANN A. MUEBLAS
Regional Executive Director

GIRL SCOUTS OF THE PHILIPPINES
VISAYAS REGIONAL OFFICE
Marina Yulo-Vargas Regional Program & Training Center
Barangay Kalunasan, Cebu City

APPLICATION FORM
(GIRL)

Event: _____ Date: _____

PERSONAL DATA:

Name: _____

LAST	MIDDLE	FIRST
Date of Birth: _____ Age: _____ Home Address: _____		
Troop Number: _____ Council: _____ Date of Last Registration: _____		
Religious Affiliation: _____ Number of Years in Scouting: _____		
Camps/Special Events Attended: _____		

<u>Event</u>	<u>Date</u>
_____	_____
_____	_____
_____	_____
_____	_____

In emergency, notify: _____ Relationship: _____

Address: _____ Telephone Number: _____

PARENT'S CONSENT

This is to certify that I have given full consent for my daughter
_____ to participate at the _____
_____.

I have considered the benefits that my daughter will derive from her participation in this activity with the understanding that every precaution is to be taken to ensure her safety.

I shall not hold the Girl Scouts of the Philippines or its representative responsible for any untoward accident that may happen beyond their control. Her physical fitness is assured in a medical examination.

_____	Signed: _____	_____
Date		Parent/Guardian

CERTIFICATION & ENDORSEMENT

We hereby certify that the applicant has met all requirements for participation in this event.

_____ Troop Leader	
_____ Council President	_____ Council Executive

GIRL SCOUTS OF THE PHILIPPINES
VISAYAS REGIONAL OFFICE
Marina Yulo-Vargas Regional Program & Training Center
Capitol Hills, Cebu City

INFORMATION SHEET

1. Name _____ 2. Age _____ yrs. old
3. Date of Birth _____ 4. Place of Birth _____
5. Home Address _____ 6. Tel. No. _____
7. Parents: (Father) _____ (Mother) _____
8. In case of Emergency, the person to notify is: _____
Address: _____ Tel. No. _____
9. Date of Latest Registration with GSP _____ Troop No. _____
10. Years in Girl Scouting:
As a Twinkler _____ As a Senior _____
As a Star _____ As a Cadet _____
As a Junior _____

11. Positions Held or Special Responsibilities in the Troop:
Inclusive Dates: _____

12. Participation in Scouting Events other than Camping:

District Level	_____	_____	_____
Council Level	_____	_____	_____
Regional Level	_____	_____	_____
National Level	_____	_____	_____

13. Camping Experiences:

	<u>Name of Participation</u>	<u>Duration</u>	<u>Number of Times</u>
Patrol Camp	_____	_____	_____
Troop Camp	_____	_____	_____
District Camp	_____	_____	_____
Council Camp	_____	_____	_____
Regional Camp	_____	_____	_____
National Camp	_____	_____	_____
Int'l Camp	_____	_____	_____

14. Badges Earned:

As a Twinkler	_____
As a Star	_____
As a Junior	_____
As a Senior	_____
As a Cadet	_____

15. Special Awards/Scholarship Received

<u>Title/Kind</u>	<u>Date Awarded/Conferred</u>
_____	_____
_____	_____

16. Organizations other than GSP/Club Affiliations

<u>Name of Club/Group</u>	<u>Position/Responsibility Held</u>	<u>Date</u>
_____	_____	_____

17. Special Interest/Hobbies

18. Religious Affiliation:

19. Food Prohibition: _____

Signature

Date

HEALTH EXAMINATION FORM

Address _____

Details of above or additional information _____

Any specific activities to be encouraged? _____
Restricted? _____

IMPORTANT : Please notify the camp if this applicant is exposed to any communicable disease during the three weeks prior to camp attendance.

Suggestions from Parent/Guardian

_____ : in case of Surgical Emergency
 _____ : I hereby give permission to the physician
 _____ : selected by the camp director to hospitalize,
 _____ : secure prior treatment for, and to order
 _____ : injection, anesthesia or surgery for my
 _____ : daughter as named above.
 _____ :
 _____ :
 Signature _____
 Date _____

PHYSICAL EXAMINATION - to be filled out by licensed physician

Code V - Satisfactory

X - Not Satisfactory (explain)

Height _____	Blood Pressure _____	Circulatory System _____	Blood Analysis _____
Weight _____		Urinalysis _____	
Eyes _____		Loco-motor System _____	
Eye glasses _____		Nervous System _____	
Ears _____		Skin _____	
Nose _____		Allergy - Please specify _____	
Throat _____			
Teeth _____			
Heart _____		General Appraisal _____	
Lungs _____		Menstrual History _____	
Abdomen _____			
Genitalia _____			
Kernia _____			

Recommendations and restrictions (diet, medicine, swimming, diving, etc.)

Immunizations:

D.P.T Series _____	Booster _____	Date _____	Tetanus Booster _____	Date _____
Typhoid Series _____	Booster _____	Date _____	(if requires by camp)	
Small Pox _____			Date _____	

Examining Physician

Telephone _____ Address _____

Date _____