

FINANCIAL ASSISTANCE REQUEST

DISTRICT: _____ UNIT #: _____ PACK _____ TROOP _____ CREW _____ SHIP _____ POST _____

Parent/Guardian requesting assistance: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Please list the reason assistance is needed:

ASSISTANCE IS NEEDED FOR:

☐ **MEMBERSHIP REGISTRATION HELP (Scout Life magazine not included):** I am able to contribute: \$ _____

DO NOT SUBMIT AN APPLICATION ONLINE. THIS FORM MUST BE ACCOMPANIED BY A SIGNED MEMBERSHIP APPLICATION.

(The Scouting America membership registration fee is \$91 for a youth & \$71 for an adult. Scouts are encouraged to earn their own way through unit fundraising. Local units may have additional program fees to join; these fees vary dependent on the unit fundraising plans.)

☐ Youth ☐ Adult Name: _____

☐ Youth ☐ Adult Name: _____

☐ **UNIFORM ASSISTANCE:** (ONLY VALID AT BAY AREA COUNCIL SCOUT SERVICE CENTER. Up to 50% off. Includes shirt, belt, patches, neckerchief, slide, handbook, pants, socks.)

☐ **PROGRAM ASSISTANCE:** (ONLY VALID FOR BAY AREA COUNCIL ACTIVITIES, TRAININGS, & CAMPS. Up to 50% off. Does not include general unit activities or out-of-council activities, trainings, & camps.)

Name of Program: _____

Date of Program: _____ I am able to contribute: \$ _____

FOR COUNCIL USE ONLY:

Unit Leader or Committee Chair _____ Date: _____

District Executive Signature: _____ Date: _____

Scout Executive Signature: _____ Date: _____

Amount Approved: _____ Processed by: _____ Date Processed: _____

Funding designation: _____ Galveston UW _____ Mainland UW _____ Brazoria UW Other: _____