

Financial Assistance Request- (February 1, 2024)

(Family, Unit, Special Organizations)

The general policy of the council is that every Scout should be given an opportunity to take part in Scouting. As with all Scout programs, it is based on the time-honored principle that an *individual Scout earns his/her own way*, however, not every Scout and/or Scout family is able to or has the resources to be able to participate in Scouting. This Request may only be used for Scouts (**no adults**) registered in the Golden Spread Council. All assistance is subject to the availability of funds through the current year. All assistance will be based on need.

The Family Assistance Request should be submitted with the youth application for a new Scout.

One form per person is required.

PLEASE PRINT: Youth Name: _____ Age: _____

Street Address: _____ Town: _____ State: _____ Zip Code: _____

Phone () _____ Pack, Troop, Crew Number: _____ Today's Date _____

To ensure the Family Assistance Fund is used for those in need, the following information **MUST** be completed by the Parent/Guardian to receive consideration for funding assistance:

New Scout ONLY:

1. Is the child involved in other activities such as local sports, 4H, gymnastics, etc? (Check applicable) Yes _____ No _____
If yes, which activity **and** did you receive financial assistance from those organizations?

2. Total **annual** household income (from all sources) \$ _____ This must be entered and include **all** income sources.

3. Total Household members _____

4. Does the family receive free or reduced school meals? Yes ___ No ___

Please check off what you request assistance with:

___ I need registration fee assistance but understand I must pay a minimum of \$25.00 to be considered. You **may** receive **UP TO 100** Percent of the remaining fees but whatever is not awarded by the council, you must pay the difference.

___ I need assistance with a uniform shirt and patches (up to 50 % of retail cost) but understand that this will only be awarded after registering in the Golden Spread Council **AND** remaining in the Pack/Troop/Crew for **1 month** from the date of this application and the parent/guardian must return to the Scout Shop to receive these items. We will retain this form but it's your responsibility to return to the Scout Shop to pick-up the items. After 3 months, you will have to reapply for uniform assistance.

___ I need assistance with a Cub Scout, Scouts BSA, or Venturing Handbook. (up to 50 % of retail cost)

The information I have provided is accurate and I request the following assistance:

- I request \$ _____ youth registration (\$80.00 full year **after** a minimum payment of \$25.00=\$105 total) = \$ _____
NOTE: On April 1, 2024 the fees change (\$60.00 full year **after a minimum payment of \$25.00= \$85 total) = \$ _____**
- Uniform Shirt and patches (Up to 50 percent retail cost) (Filled out by Shop Staff) = \$ _____
- Handbook: Lion, Tiger, Wolf, Bear, Webelos, Scouts BSA, Venturing Handbook (Circle one) = \$ _____
(Up to 50 % of retail cost)

Total Amount Requested:\$ _____

***Parent/Guardian Signature** _____

****NOTE: The section below is required to have a signature ONLY if the Unit is assisting in this request and requests the council to take funds from the unit account for this registration.**

The Unit will help with this request in the amount of: \$ _____

I authorize the council to take funds from the Pack/Troop/Crew (circle one) account

* Unit Leader Signature* _____

- **Special Organization is only for Hutchinson County Units fees (as approved by Hutchinson County United Way)**

Unit Type and Number: _____

Total Fee's: \$ _____

Certification and Approval Section:

Registrar: This Scout is currently registered in the unit () YES () NO () () Application on-hand pending this form approval.

This Unit Account currently has enough funds to cover the registration fee (if requested above) () YES () NO

Signature: _____ Date _____

Assistant Scout Executive Approval: I recommend approval of request based on the information provided.

Signature: _____ Date _____

Scout Executive: I approve/disapprove this request for assistance in the amount of \$ _____

Signature: _____ Date _____

Office Use:

BSA Registration Fee: 1-8901-100-99, Handbooks: 1-8903-100-25, Uniforms: 1-8908-100-25, Hutchinson County- 1-8901-162-25