

Youth Financial Assistance Application

Youth Information:			
Youth's Full Name:		Unit type and Numb	er
Current Age: Grade Does Scout re	ceive free or reduced s	chool lunches Yes No	
The Council may be able to assist with up to 50% of	of the membership fee.		For office use only Approved Amount:
Youth Registration Fee & Insurance is \$80 for 1 full year	Requ	ested Assistance	
New Youth Joining Fee (\$25 for new scout)	Requ	ested Assistance	
Requested assistance for handbook:			
Handbook (cost varies) - type needed	Reque	ested Assistance	
		Total Approved	
Parent/Guardian Information:			
Parent/Guardian Name:		Phone:	
Address:	City:	Stat	te Zip:
Email:		(required	d)
Size of family living at the address:Youth	Adults		
Gross Family Income (before taxes): (circle one) - re	equired		
Below \$30,000 \$30,000-\$50,000	\$50,000-\$70,000	\$70,000-\$100,000	Above \$100,000
Explanation of Need: State specific reasons why fees cannot be afforded: (Attach separate sheet i	f needed)	

Personal Fundraising Efforts: If new scout – expectations are that you participate in the next fundraising opportunity. Please circle one Have you or are you going to participate in the Council Popcorn Sale Yes / No Estimated Sales: _____ Have you or are you going to participate in the Council Camp Card Campaign Yes / No Estimated Sales: _____ Yes / No Estimated Sales: _____ Other _____ Yes / No Estimated Sales: _____ SIGNATURES - Must have both signatures to be considered. "I have read the above Youth Financial Assistance application and agree that the information provided is accurate to my knowledge". Parent/Guardian: _____ Date: _____ Unit Leader: _____ Date: _____

Approval _____

Scout Executive

Submit Completed Application to:

Quincy Service Center 2522 Locust Street Quincy, IL 62301 Burlington Service Center 3007 Flint Hills Drive Burlington, IA 52601