

Application for Financial Assistance

Requests may or may not be granted based on available funds and eligibility. Units are encouraged to provide financial assistance through annual fundraising efforts. Council funds are intended to help families in need when unit funds are not available. This application should be completed by parent or guardian. All information will be kept confidential.

Applicant name: _____ Youth Adult Age: _____
(Youth only)

Unit type: Pack Troop Crew Post Unit number: _____ Grade: _____ Gender: M F

Name of parent/guardian: _____

Address: _____ City: _____ Zip: _____

Phone number: _____ Email address: _____

Briefly describe the family's need for assistance: _____

Annual household income: \$ _____ Total household members: _____

A new application is required for each Scouting year (January - December).

Type of Assistance Requested:

BSA Registration Fee

Uniform (includes Scout shirt and required patches):

Shirt type: Lion t-shirt Cub Scout youth Scouts BSA youth Adult

Shirt size: XS Small Medium Large XL 2XL

Youth handbook:

Lion Tiger Wolf Bear Webelos Scouts BSA

Other (please explain): _____

Please note: assistance to attend camp requires a completed Campership Application for Financial Aid.

Families are asked to contribute what they are able towards the total cost of the items requested above.

Amount family will contribute: \$ _____ (enclosed with application).

Parent or guardian's signature: _____ Date: _____

Unit leader name: _____ Unit leader phone number: _____

Unit leader signature: _____ Date: _____

Applications must be signed by a unit leader in order to be considered.

Submit completed application to:

Samoset Council, 3511 Camp Phillips Road, Weston, WI 54476

Please contact us at (715) 355-1450 with any questions.

<i>Office Use Only</i>	
Date Received:	_____
Amt. Approved: \$	_____
By:	_____