

Request for Membership Financial Assistance and Camp Fee Assistance

Financial assistance is intended to be used when the individual families and/or the unit is unable to assist. Assistance funds are limited and will be granted based on availability and eligibility.

Families/units are asked to contribute towards the total cost. Each family and/or unit should contribute a minimum of \$16 (council insurance fee) towards each membership registration request. If a Scout/adult volunteer needs assistance getting a handbook or a uniform please provide the size of uniform and the type of handbook. Camp Assistance is limited to 50% of the overall camp fee.

A new requested should be submitted for each assistance needed. All information will be kept confidential. Please fill in all information. Please submit the forms to our council office and/or your District Executive. (Mail: LHC, BSA—Financial Assistance, 12001 Sycamore Station Place, Louisville, KY 40299 or email:

District: _____ **Date of Request:** _____

Unit Type: Pack Boy-Troop Girl-Troop Crew/Ship Post **Unit Number:** _____

Circle Youth or Adult	Youth/Adult Name	Membership Fee Amount of Assistance Requested	Handbook Request Type	Uniform Request Type & Size	Camp Fee Amount Requested
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					
Y / A					

**Annual Council Insurance Fee is \$16 per youth or adult, if making a membership request the \$16 should be included with the assistance form.*

*The annual Youth Membership fee is \$85 per year. The annual Adult Membership fee is \$65 per year.**



ATTENTION: If applying for Camp Fee Assistance page 2 must be completed for each Scout/Scouter.



EVENT

- _____ Cub Scout Day Camp - Please indicate location _____
- _____ Cub Camp at Tunnel Mill
- _____ Scouts BSA Summer Camp at Camp Crooked Creek
- _____ Scouts BSA Summer Camp at Pfeffer Scout Reservation
- _____ Winter Camp
- _____ NYLT (National Youth Leadership Training)
- _____ Other _____

NOTE: Financial Assistance is not awarded for any camps until the year the camp is being held. If you mark a camp during the fall, you must re-apply in the new year for the camps the following year.

Scout's/Scouter's Name: _____ **Youth or Adult**

Scout's Age: _____ **Parent/Guardian Name:** _____

Phone: _____ **Email:** _____

Our family can provide \$ _____ toward the camp fee.

Reason for the request:

Parent/Guardian Signature: _____ **Date:** _____

Unit Support: Our unit will provide \$ _____ toward the camp fee.

Unit Leader Signature: _____ **Date:** _____

*****OFFICE USE ONLY*****

Membership or Additional Support Assistance Review/Approval

Council Sponsored Unit Fundraising Participation Review: Y N Popcorn Y N Family FOS Y N Camp Cards

Approved \$ _____ Partial Approval \$ _____ Not Approved Reason: _____

District Executive: _____ *Date:* _____

Approved \$ _____ Partial Approval \$ _____ Not Approved Reason: _____

Field Director: _____ *Date:* _____

Approved \$ _____ Partial Approval \$ _____ Not Approved Reason: _____

Director of Field Service: _____ *Date:* _____

Approved Full Amount: \$ _____ **Partial Approval in the amount of \$** _____

Request completed/fulfilled by (name): _____ Date: _____ Initials verified _____

Camp Fee Assistance Review/Approval

Committee:

Camping:

Amount Approved:

Account: