

Lincoln Heritage Council

Boy Scouts of America

Request for Financial Assistance



Requests may or may not be granted based on available funds and eligibility. Council funds are intended to help families in need when unit funds are not available. Families/units are asked to contribute towards the total cost. Please fill out the second page of this request to give us the exact amount that each scout is requesting toward their membership fees. At a minimum we are asking every family to cover the Annual Council Fee. There is also space provided to indicate if a scout/adult volunteer needs assistance getting a handbook or a uniform. Please make sure you give us the correct size and type of uniform or handbook. If there are any additional needs, please use the bottom of the second page to make those requests.

Requests should be completed by unit leadership. **All information will be kept confidential. Please fill in all information!**

A new request is required for each Scouting year.

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

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

Unit Leader Name: _____ **Phone Number:** _____

E-Mail: _____

Unit Leader Signature: _____

Total amount being requested is: \$ _____ *(please use 2nd page of form to detail the request)*

Requests should be signed by a unit leader. Submit completed request to:
Lincoln Heritage Council, ATTN: Financial Assistance, 12001 Sycamore Station Pl, Louisville, KY 40299 **or**
matt.nash@scouting.org. Please contact us at (502) 361-2624 with any questions.

*****OFFICE USE ONLY*****	
Unit Participation:	<input type="checkbox"/> Popcorn <input type="checkbox"/> FFOS <input type="checkbox"/> Camp Cards
<i>As the Unit Serving Executive, I certify that these youth and/or adults have been properly recruited into the indicated unit. (If the position is vacant, please indicate such.)</i>	
Unit Serving Executive: _____	Date: _____
<i>As the Field Director, I have discussed and verified the nature of this request for financial support to cover these associated registrations costs and statement of need. I have reviewed the applications and this request for support meets with my approval.</i>	
Field Director: _____	Date: _____
<i>Based upon the information provided by the Unit Service Executive and verified by the Field Director, I hereby confirm that the Lincoln Heritage Council is paying part or all of the registration fee in accordance with a board approved Council plan and any national membership validation requirements.</i>	
Director of Field Services: _____	Date: _____

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Please fill out what assistance you are requesting for each scout. For the Membership assistance please indicate just the amount they need after the family and unit have contributed what they can toward the membership fees. (At a minimum we are asking each family pay the Annual Council Fee)

Membership Fee Assistance			Additional Support	
	Youth/Adult Name	Amount of \$\$\$ Requested	Handbook Request (Include Type)	Uniform Request (Include Type & Size)
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				
Y / A				

If your unit has any additional needs, please let us know:

***Annual Council Fee is \$16 (this amount is the same for youth and adults)**
 *The annual Youth Membership fee is \$75 (\$6.25 per month and can be prorated)
 *First Time Scout Fee is \$25 (not prorated)
 *The annual Adult Membership fee is \$45 (\$3.75 per month and can be prorated)