

Registration Funding Request Form

District: _____ Unit Type & Number: _____

Chartered Organization: _____

Registration Assistance: Units that participate in Family Fos and at Least One Product Sale will be given first consideration.

	# Assisted		# Months		FEES		Total Amount Requested
Youth		X		X	\$6.00 per month	=	
Adults					\$3.75 per month		
Insurance Fee					\$1.33 per month		
New Member Fee					\$25 One Time Joining Fee		
Charter Fee					\$75.00 annual		
Total Fees:							

Chartered Organization Representative or Committee Chair Signature:
 On behalf of our Scouting program, we request the above for registration assistance.
A statement of need from the unit/chartered organization is attached to this request in support of this assistance.

_____ Signature _____ Printed Name _____

As the youth serving executive, I certify that these youth and/or adults have been properly recruited into the indicated unit. Also, in working/discussing with unit I support the request/statement of need.
 District Executive _____ Date: _____

As the Field/Outreach Director, I have discussed and verified the nature of this request for financial support to cover these associated registration costs and statement of need. I approve this request.

Field/Outreach Director _____ Date: _____
 Unit Participates in: Popcorn _____ Camp Cards _____ Family Fos _____

Charge to Account (Circle One)	
Outreach 1-8901-045-20	Learning for Life 1-8901-002-20

Direct of Field Service Approval _____ Date: _____



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LINCOLN HERITAGE COUNCIL

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