



Application for Financial Assistance

For full consideration, submit by April 1, 2023.

Both sides of form must be filled out completely or it will not be considered!

Financial assistance is available for Cub Scouts, Scouts BSA, Ventures, and Explorers who wish to attend W. D. Boyce Council summer programs. The Council Program Committee will make every effort to honor requests, however, funds are limited.

Financial Assistance Guidelines:

1. The youth must be a registered member of the Boy Scouts of America and reside in the jurisdiction of the W. D. Boyce Council.
2. There must be a demonstrated need for assistance. Reasons why this camp fee can not be afforded must be stated.
3. The youth's family and/or unit must be prepared to pay at least 50% of the fee.
4. This form must be submitted by April 1, 2023 for full consideration. Incomplete forms (both sides) will not be considered.
5. All information is kept strictly confidential.
6. Assistance can be granted only once in a twelve month period to a scout.
7. All that apply for Financial Assistance will be locked in to the Early Bird Prices whether or not they receive Financial Assistance.

Scout Information

Please print legibly

Youth's Full Name _____ Grade in the fall _____
 Street Address _____ City _____ Zip _____
 Home Phone Number _____ Currently registered Yes ___ No ___ Unit # _____
 Parent/Guardian Name _____ Email _____
 Parent/Guardian Phone Number (work) _____ (home) _____
 Size of family: Youth ___ Adults ___ Is parent/guardian employed? Yes ___ No ___ Full time ___ Part time ___
 If spouse, is spouse employed? Yes ___ No ___ Full time ___ Part time ___
 Specific reasons for assistance, not simply that the fee can not be afforded. Attach more paper if needed, must be completed for full consideration.

Assistance requested for: _____ Cub Scout Family Camp _____ Cub Scout Resident Camp _____ ISR Scouts BSA Camp
 (check one program only) _____ Cub Scout Day Camp _____ NYLT

Assistance Needed - Must be Completed.

Cost of Summer Program \$ _____
 Amount the family will pay \$ _____
 Amount the youth will pay \$ _____
 Amount the unit will pay \$ _____
 Total available funds \$ _____
 Amount of assistance requested \$ _____
 (Not to exceed 50% of program fee)

OFFICE USE ONLY	
Date Received _____	Date Reviewed _____
Amount received with application \$ _____	
Amount approved \$ _____	
Council approval by _____	
Notice of Approval sent to unit leader _____	
(date)	

Parent/Guardian Signature _____

OVER FOR UNIT LEADER APPROVAL

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Unit Leader must complete this side of form

Based on your knowledge of the family, do you think assistance should be granted?

_____ Yes _____ No If yes, explain:

Has the youth been active with the unit? (participation in unit meetings and activities),

Please explain:

Has the youth demonstrated initiative to earn money to help pay for any of his/her activities?

If yes, explain:

Does your unit participate in the Council Popcorn Sale? Yes/No

What was the total of the youths sale? _____

Unit Leader's Approval _____

(signature)

Unit Leader's Name _____

(please print)

Street Address _____

City _____ Zip _____

Phone number: (W) _____ E mail: _____

(H) _____