

APPLICATION FOR REGISTRATION ASSISTANCE

(Please print clearly)

District: _____ Unit Type: _____ Unit #: _____

Scout's Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Parent's Name: _____

Phone: _____ Email: _____

PROGRAM INFORMATION:

The Northern Lights Council is committed to making Scouting available to all children. In support of that commitment, the council will pay the portion of the national BSA registration fee that a youth member cannot afford. The dollar amount requested is the difference between the national BSA fees and what the youth and/or chartered organization can afford.

ASSISTANCE AVAILABILITY:

To help ensure there are always sufficient funds to help low-income youth enjoy Scouting, we encourage the unit to participate in the annual fall popcorn sale and spring sale. **We cannot guarantee that every youth that applies for this program will receive assistance. A limited amount of funds is available each year.**

INFORMATION PROVIDED BY PARENT:

Is the Scout eligible for free or reduced lunch at school?

Yes No

Number of adults in home: _____

Number of children under 18 in home: _____

Household Income (select one)

Less than \$10,000 per year \$10,000 to \$29,999 per year \$30,000 to \$49,999 per year

\$50,000 to \$69,999 per year \$70,000 or more per year

Please explain any additional extenuating circumstances and your financial need:

I understand that my unit may charge additional dues to help pay for program expenses. Arrangements have been made for unit to cover these additional dues or have we agreed on an installment plan that meets our ability to pay.

Parent's Signature: _____

Date: _____

INFORMATION PROVIDED BY UNIT LEADER:

Please check all that apply.

- This is a new Scout.
- This Scout is an active member of our unit.
- Our unit regularly attends an in-council summer camp.
- Our unit participates in the annual fall popcorn sale and/or spring product sale.
- This Scout participated (or will participate) in the annual fall popcorn sale and/or spring product sale.
- Arrangements have been made for the unit to cover any additional unit dues or we have agreed upon an installment plan with the parent that meets his/her ability to pay.

Unit Leader's Printed Name: _____

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

Both pages of this form must be submitted, along with the BSA application form to one of the council service centers and will be reviewed by the people listed below.

APPROVAL FOR REGISTRATION ASSISTANCE:

This application is approved for registration assistance in the amount of \$_____.

District Executive Signature: _____ **Date:** _____

Scout Executive Signature: _____ **Date:** _____

Business Manager Signature: _____ **Posted Date:** _____



**BOY SCOUTS
OF AMERICA®**

NORTHERN LIGHTS COUNCIL

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