



## Youth Financial Assistance Application

### Youth Information:

Youth's Full Name: \_\_\_\_\_ Unit #: \_\_\_\_\_

Age: \_\_\_\_\_ Years in Scouting: \_\_\_\_\_ Current Rank: \_\_\_\_\_

Type of Assistance Being Requested: (check all that apply):

\_\_\_\_ Registration Fees & Insurance (\$45)    \_\_\_\_ Boy's Life Magazine    \_\_\_\_ Uniform Shirt & Patches

\_\_\_\_ Handbook, type needed: \_\_\_\_\_

Council or District Activity (list): \_\_\_\_\_

Other Assistance (list): \_\_\_\_\_

### Parent/Guardian Information:

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Size of family living at the address: \_\_\_\_ Youth \_\_\_\_ Adults

*Gross Family Income (before taxes): (circle one)*

Below \$30,000    \$30,000 - \$50,000    \$50,000 - \$70,000    \$70,000 - \$100,000    Above \$100,000

Annual Household Salary (Optional): \_\_\_\_\_

### Explanation of Need:

State specific reasons why fees cannot be afforded: (Attach separate sheet if needed)

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Unit Leader Statement of Support (optional): (Attach separate sheet if needed)

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