



Girl Scouts of the Northwestern Great Lakes, Inc.

EVENT FINANCIAL ASSISTANCE FORM

To be used for Council-Wide and Council-Sponsored programs, events and camps

Parents or guardians, please complete this form if financial assistance is needed. Note: you can only apply for Camp Financial Assistance once per girl per camp season. Mail form along with event/camp program registration form. If financial assistance is not granted, your deposit (if requested) will be refunded in full.

Girl's Name _____ Phone (____) _____

Address _____

City/State/Zip _____

Email _____

County _____

Age _____ Date of Birth _____ Grade in Fall 2009 _____

Is she a Girl Scout? Yes No Troop #: _____

Parent/Guardian Name _____ Phone: Day (____) _____

Parent/Guardian Address (if different from above) _____

Girl lives with: Both Parents Mother Father Guardian Foster Home

Total number of people in household _____ Dependent children's ages _____

Work status of adults in household:

#1 adult: Employed Full-time Employed Part-time Unemployed

#2 adult: Employed Full-time Employed Part-time Unemployed

Has your daughter attended program events before? Yes No Camp? Yes No

Number of other siblings attending this event _____ or Camp _____

Has your daughter previously received financial assistance for an event? Yes No Camp? Yes No

Did your daughter participate in the last Product Program (Fall or Cookies) Yes No

Name Camp/Event _____

Cost \$ _____ Amount family or girl is able to pay \$ _____

Cookie Dough to be used _____

Amount requested \$ _____

Signature _____

*Rules of acceptance and participation in the program are the same for everyone without regard to race, color, ethnicity, creed, national origin, age and sex and socioeconomic and special needs status, providing program and membership requirements are met.

FOR OFFICE USE:

Event/Camp Name _____	Dates _____
Event/Camp _____	Total Fee _____
Date Rec'd _____	Amount _____