



Girl Scouts of Western Washington
Financial Assistance Request Form
Community Day/Twilight and
Community Resident Camp
Summer 2012

Send completed and signed: 1) financial assistance application 2) most recent tax return to: PO BOX 770, DuPont WA 98327-0770 • Phone 253-798-5002 or 800-541-9852 x 455 • Fax 253-473-0969
Email financialassistance@girlscoutsww.org

INSTRUCTIONS:

- ♦ All applicants must be registered members of Girl Scouts of Western Washington and live within the area served by Girl Scouts of Western Washington. (Membership fee may accompany camp registration form.)
- ♦ Independent income verification, specifically the most recent tax return for the parent(s) or legal guardian, is required for all applications. See Girl Guidelines for details.
 - **Examples:** Tax Return, W-2, award letter from Social Security (SSI), State Assistance (TANF) or child support.
- ♦ Applicant must be registered for camp before financial assistance is granted.
- ♦ **One** request form per applicant. Parent or guardian signature is required.
- ♦ Requests must be submitted at least 30 days before the camp and 60 days before for any extenuating circumstances.
- ♦ All financial assistance applications are confidential.
- ♦ Please print clearly and use ball point pen. Contact office after faxing to confirm request form has been received.
- ♦ See Girl Financial Assistance Guidelines document for complete details.

APPLICANT INFORMATION:

Camper Name: _____ Troop #: _____ SU #: _____

Mailing Address: _____ City: _____ Zip: _____

County: _____ E-mail: _____

Daytime Phone: (_____) _____ Other Phone: (_____) _____

- ☐ Check here if not yet registered as a Girl Scout member. Girls must become members of Girl Scouts before attending a camp or receiving financial assistance. Please fill out membership section on camp registration form.
- ☐ Check here if you need financial assistance for the \$12.00 membership fee.

FINANCIAL NEED:

Include salary, unemployment benefits, social security (SSI), child support, inheritance, state assistance (TANF), etc. **If you already have a grant for the year please write 'already submitted' below.**

Annual Family Income: \$ _____ Family Size ☐1 ☐2 ☐3 ☐4 ☐5 ☐6 Other _____

Extenuating Circumstances: _____



Please send the camp registration to the camp you want your daughter to attend. Send the financial assistance paperwork to the address above.

-OVER-

Financial Assistance Request Form

Community Day/Twilight & Community Resident Camp

Last Name: _____

First Name: _____

Send completed and signed financial assistance application to:

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CAMP INFORMATION:

All Community Resident Camps are located at Camp Lyle McLeod. Please use full program/camp names below. (Example: Kayak Community Camp) Sometimes there is more than one camp happening at a time in the same location.

Select One:

☐ Community Resident Camp ☐ Community Day/Twilight Camp

Income verification is required for all applications. See Girl Guidelines for more details regarding income verification.

Program/Camp Name _____

Camp Location _____

Cost _____ Camp Dates _____

Print Parent/Guardian Name Here

Signature of Parent/Guardian Date

Check list of needed verifications:

Have you included?

☐ Income verification – if not already on file.

OFFICE USE ONLY:

Date Received: _____

Program Cost: _____

CC, DC/TC _____

Registered Girl Scout:

Beginning Balance _____

Camp Dates _____

☐ Yes ☐ No

FA Balance requested _____

Confirmed Date _____

IV ☐ Yes ☐ No