



BOY SCOUTS OF AMERICA®
OCCONEECHEE COUNCIL

Application for Financial Hardship Assistance – Council Fee 2021

Please submit only one application per family

Parent/Guardian (please print clearly) _____

Address _____ City _____ State _____ Zip _____

Preferred Telephone Number _____ Email Address _____

District (please circle) Awahili Black River Crosswinds Dogwood Highlander Impeesa LaFayette Mawat Neuse River Shakori

Family Members Registered in Scouting

Adults:

Name _____ Position _____ P/T/C/S # _____

Name _____ Position _____ P/T/C/S # _____

Youth:

Name _____ Age _____ Rank _____ P/T/C/S # _____

Name _____ Age _____ Rank _____ P/T/C/S # _____

Name _____ Age _____ Rank _____ P/T/C/S # _____

Statement of Need

Empty box for Statement of Need with three horizontal lines.

Amount of Financial Assistance Requested: \$ _____ (Council Fee=\$54.00 per registered youth)

Will the youth participate in the Council's fundraisers in 2021 (either selling Trails End Popcorn or Discount Camp Cards)? Yes or No

As parent or guardian of the above named individual(s), I affirm that the financial aid requested is needed.

Parent/Guardian Signature _____ Date _____

Unit Committee Approval

I have reviewed this application and affirm these Scouts are registered/registering in my unit, are in good standing, and needing the assistance requested:

Signature _____

Date _____

Printed Name _____

Position in the Unit _____

A committee made up of at least three Council volunteers will review all requests for financial assistance. The Committee is recruited and/or appointed by the Council President and Scout Executive.

Council Approval

Approved: Yes _____ No _____ Amount Approved \$ _____ By: _____