

GIRL SCOUTS OF MIDDLE TENNESSEE

2012 CAMP FINANCIAL ASSISTANCE APPLICATION

PLEASE NOTE: *This form is due with the \$25 deposit and registration form. This form may be submitted by mail only. Financial assistance is awarded on a need basis and is available only for registered members of Girl Scouts of Middle Tennessee. A financial assistance approval letter will be sent within approximately 3 weeks after your registration form is processed.*

CAMPER INFORMATION

Camper name: _____
First Middle Last

Mailing address: _____
Street/Apt/Lot # Street City State Zip Code

Phone: (____) _____ County: _____ Grade in fall 2012: _____ Age: _____ Date of birth: ____/____/____

Troop number: _____ Camper has been a Girl Scout for _____ years. Camper has attended camp for _____ years.

FAMILY INFORMATION

Have you ever received financial assistance from Girl Scouts of Middle Tennessee?
 Yes No If yes, when? _____

Parent/Guardian name: _____

Home phone: (____) _____ Cell phone: (____) _____

Number of children living at home: _____ Number of dependents on family income: _____ Ages: _____

Total annual income (check one):
 \$0-\$12,000 \$21,001-\$25,000 \$40,001-\$50,000
 \$12,001-\$15,000 \$25,001 - 30,000 \$50,001-\$60,000
 \$15,001-\$18,000 \$30,001-\$40,000 More than \$60,000
 \$18,001 - 21,000

How much can you contribute to the cost of the summer camp fee? \$ _____

How much is your daughter willing to contribute to the cost of the summer camp fee? \$ _____

How much are you requesting toward the cost of summer camp fee? \$ _____

Income sources (check all that apply):
 Salaries Social Security Disability Other
 Investment Unemployment Child Support

SPECIAL CIRCUMSTANCES

Please describe the circumstances that explain your financial need (attach an additional sheet).

CAMP SESSION INFORMATION

Please list the programs for which you are requesting financial assistance.

| PROGRAM TITLE | SESSION DATES | WHICH CAMP | | FEE |
|-------------------|---------------|--|--|-------|
| 1st choice: _____ | _____ | <input type="checkbox"/> Camp Sycamore Hills | <input type="checkbox"/> Camp Holloway | _____ |
| 2nd choice: _____ | _____ | <input type="checkbox"/> Camp Sycamore Hills | <input type="checkbox"/> Camp Holloway | _____ |
| 3rd choice: _____ | _____ | <input type="checkbox"/> Camp Sycamore Hills | <input type="checkbox"/> Camp Holloway | _____ |

SIGNATURE AUTHORIZATION

I have completed every section of this form and have included my \$25 non-refundable deposit in order to receive financial assistance.

Parent/Guardian signature: _____ Date: _____