



# 2017 SUMMER CAMP FINANCIAL ASSISTANCE

Girl Scouts of Middle Tennessee | 4522 Granny White Pike, Nashville, TN 37204

Phone: (615) 383-0490 Fax: (615) 460-0238 Email: campforms@gsmidtn.org

**PLEASE NOTE:** This form is due with \$100 deposit and camp registration form. This form may be mailed, faxed or emailed with payment. **Camp assistance is awarded on a need basis and available only for registered members of Girl Scouts of Middle Tennessee. Girls must be registered Girl Scouts by January 13 for scholarship consideration.** Camp financial assistance approval letter will be sent within three weeks of your registration. All requests for financial assistance are due before May 4.

### CAMPER INFORMATION

Camper Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Mailing Address: Street Apt/Lot #: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ County: \_\_\_\_\_

Grade for Fall 2017: \_\_\_\_\_ Troop #: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Camper has been a Girl Scout for \_\_\_\_\_ years. Camper has attended camp for \_\_\_\_\_ years.

Camp program you are applying for: \_\_\_\_\_ Program dates: \_\_\_\_\_

### FAMILY INFORMATION

Have you ever received financial assistance from Girl Scouts of Middle Tennessee?

Yes  No If yes, when? \_\_\_\_\_

Parent/ Guardian Name: First \_\_\_\_\_ Last: \_\_\_\_\_

Daytime Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Number of children living at home: \_\_\_\_\_ Number of dependents on family income? \_\_\_\_\_ Ages \_\_\_\_\_

Total annual income:

- \$0 - \$12,000     \$12,001 - \$15,000     \$15,001 - \$18,000     \$18,001 - \$21,000     \$21,001 - \$25,000     \$25,001 - \$30,000
- \$30,001 - \$40,000     \$40,001 - \$50,000     \$50,001 - \$60,000     \$60,001 - \$75,000     \$75,001 - \$90,000     over \$90,000

Did you participate in Fall Product or Cookie Sale Programs?  Yes  No Amount sold \_\_\_\_\_ Fall Product \_\_\_\_\_ Cookie Program \_\_\_\_\_

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

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

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

Income sources (check all that apply):

- Salaries     Disability     Social Security     Investment     Child Support     Other \_\_\_\_\_

### SPECIAL CIRCUMSTANCES

Please describe the circumstances that explain your assistance need (attach an additional sheet if needed).

*\*Application will not be considered without completing this section.*

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## SUBMIT THIS FORM WITH COMPLETED SUMMER CAMP REGISTRATION FORM

### SIGNATURE AUTHORIZATION

I have completed every section of this form and have included my \$100 deposit in order to receive camp financial assistance consideration.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_