



## EVENTS/ACTIVITIES FINANCIAL ASSISTANCE APPLICATION

Girl Scouts of Silver Sage  
1410 Etheridge Lane  
Boise, ID 83704  
(208) 377-2011 or (800) 846-0079  
FAX (208) 377-0504  
www.girlscouts-ssc.org

**NOTE: This fund is for girl participation only and is for events/activities (workshops, day camps, etc.). Do not use this form for membership registration or resident camp. Assistance is based on need and may cover 20%-80% of program fees. Each qualified girl is eligible for two (2) requests per membership year. Request must be submitted before registration deadline.**

### Girl's Information

Girl's Name (first, m, last) \_\_\_\_\_

Troop # \_\_\_\_\_ Grade Level \_\_\_\_\_ Parent Email \_\_\_\_\_

Current Member (yes) \_\_\_ (no) \_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

### Request

Event/Activity Name \_\_\_\_\_ Date of Activity \_\_\_\_\_

Amount requested \$ \_\_\_\_\_ Amount Able to Pay \$ \_\_\_\_\_ Monthly Household Income \$ \_\_\_\_\_

**(Please explain reason for request – unemployed, medical expenses, multiple children in scouts, etc.)**

### Other Sources of Funding

Questions for Parents regarding cookie program participation:

Did applicant participate in this year's Cookie Program? \_\_\_yes \_\_\_no\_\_\_

If not, please explain why: \_\_\_\_\_

Did she earn Cookie Dough? \_\_\_yes \_\_\_no **(Cookie Dough can be used for most program events/activities)**

**Signature (I certify that all of the information on this application is true and complete. Incomplete requests may not be approved. Girl registration must be current. Troop leaders are not permitted to submit this form in place of parent)**

\_\_\_\_\_  
Signature of Parent/Guardian

### Girl Scout Office Use Only

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Date Approved/Denied

\_\_\_\_\_  
Amount Approved

\_\_\_\_\_  
Director of Program Signature