

APPLICATION FOR PROGRAM/INSURANCE FEE ASSISTANCE

Applicant

Name _____ Age _____ Rank _____ (New Scout)

Address _____ City _____ State _____ Zip _____

Troop/Pack/Crew/Post # _____ District: Fort Orange, Mahikan, Schenectady, Saratoga, Sir William Johnson, Wakpominee, Adirondack

Has the applicant received Registration Assistance before? Yes No

Parent/Guardian

Names _____

Number of children (under 18) in family _____ Number of children on Free/Reduced Lunch Program _____

Parent/Guardian #1 occupation _____ Currently employed: Yes No

Parent/Guardian #2 occupation _____ Currently employed: Yes No

Household yearly income: work, child support, alimony, pension, retirement payments, social security, other income received

- Under \$20,000 \$20,001-\$30,000 \$30,001-\$40,000
 \$40,001-\$50,000 \$50,001-\$75,000 \$75,001+

Thrifty

A Scout works to pay his way and to help others. He saves for the future. He protects and conserves natural resources. He carefully uses time and property.

Amount Requested

Council Program/Insurance Fee (\$26.00) \$ _____
(The amount paid can be adjusted by the Review Committee)

Unit Committee Approval

The unit participates in the:	Council Popcorn Sales	Yes	No
	Nuts for Scouting	Yes	No

Signed _____ Position _____

Council Approval

Received on _____

Application: Approved _____ Not Approved _____ Amount \$ _____

Signed: _____ Date: _____
Council Representative

If you have questions or need help with this form go to: trcscouting.org/programfee