Anthony Wayne Area Council Request for Membership/Registration Funding and/or Individual Council Program Fee Assistance

The Anthony Wayne Area Council wants to make sure every youth has an opportunity to fully participate in our program. To help meet this goal, a fund has been established to help families for whom the Council Membership Dues or Program Fee may present a financial hardship. To help ensure we continue to receive financial gifts that make this assistance program possible, all sections of this form should be filled out completely. (We cannot assist with additional Unit fees.)

Unless the	Scout is	a new	member,	in order	to provide	financial	l assistance,	the C	Council requ	ires that	each
Scout reque	esting a	ssistand	ce (check	cone):							

☐ Has participated in the Anthony Wayne Area Council annual Popcorn Sale

☐ Is a New Member

How the process works:

- 1. Scout family or potential Scout family indicates they would like to be in Scouting; however, the Council Program Fee and/or Membership Dues would create a financial hardship.
- 2. The Scout's Unit leader completes the Unit Leadership Section below and provides the amount of any potential contribution from the family and a Unit and/or Chartered Organization assistance fund.
 - a. Assistance may be requested for Membership/Registration (\$85/youth), and/or Council Program Fee (\$54/youth, max 2 per household)
- 3. A separate form for each individual applying for assistance should be completed.
- 4. Completed form should then be submitted by the Unit to the Council:
 - a. With recharter paperwork, if assistance is associated with the Unit recharter.
 - b. With a Youth Application, if assistance is associated with an individual application.
- 5. The Council reviews the assistance request, with final approval provided by the Field Director, and the Council will share the decision with the Unit leader.

Unit Leadership Section

Date of Request	District Name	Youth's Full Name		
Unit Type & Number	Charter Partner	Youth's Scout Rank		
Unit Leader's Name	Family Contact Name	Other Registered Family Members		
Family Contact Phone Number	Family Contact Email	Total Fees Due		
\$ Provided by Family	\$ Provided by Unit/Charter Partner	Total Assistance Requested		

Compelling reason for needed assistance (use add	itional paper if needed)
As a member of the Key 3 of our Unit (Unit Leader, Representative) I have discussed this request with request this assistance in support of our Scouting P	our Chartered Organization, and together we
Signature	Date
As the District Executive serving this Unit, I request certify that this youth has been properly recruited in membership standards. I further understand that a recruited, or that is registered without the Unit's knowld be a violation of Council and Scouting American	to the indicated Unit and meets all BSA ny youth registration that has not been properly wledge or their family's knowledge or consent
District Executive Signature	Date
As the direct supervisor of this employee, I have disfinancial support to cover these associated registrate approval.	
Field Director Signature	Date

^{*} Signatures confirm the validity of the attached application, and confirmation that the Council is paying a part, or all, of the registration fee in accordance with local and national membership validation requirements. Upon finding all information presented is accurate, this individual application for membership registration assistance is approved.