

# Camp Financial Assistance Application

**IMPORTANT** →  
Use one application per person. Complete this **ONLY** if you are requesting financial assistance with camp.

**Return to:**  
GSNEO  
CorporateOffice  
330-864-9933/800-852-4474  
330-467-1901 (fax)

*Financial Assistance Applications must be post-marked, faxed, or walked into the GSNEO Corporate Office within 72 hours of online registration. to submit your financial assistance form. If Camp FAF is not received, your camp registration may be cancelled.*

## Camper Information

Camper Name \_\_\_\_\_ Troop/Group # \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_  
 Grade in Fall \_\_\_\_\_ Has the girl attended camp before?  Yes  No If yes, what year? \_\_\_\_\_  
 Girl Scout Level  Daisy  Brownie  Junior  Ages 11-17 # years in Girl Scouting \_\_\_\_\_

## Campership Request

### Committee Use Only

Program Name/Date	Fee	Family Contribution <i>In addition to the required deposit.</i>	Amount Requested	Approved	Acct #

## Family Description

Head of Household \_\_\_\_\_ Income \_\_\_\_\_  
 Other Adult(s) in Household \_\_\_\_\_ Income \_\_\_\_\_  
 Total Income \_\_\_\_\_  
 Number of children in household (age 18 and under), including applicant \_\_\_\_\_  
 Number of adults \_\_\_\_\_ Number of family members in Girl Scouting \_\_\_\_\_

## Financial Statement *(This part MUST be completed to be considered)*

Has the applicant participated in this year's Cookie Sale?  Yes  No # of boxes sold \_\_\_\_\_  
 Has the applicant participated in this year's Fall Product Sale?  Yes  No Amount sold \$ \_\_\_\_\_  
 Has the applicant received financial assistance within the last year?  Yes  No Amount rec'd \$ \_\_\_\_\_  
 How does your family support Girl Scouts?  
 Family Partnership  
 Volunteer Positions (list) \_\_\_\_\_  
 Other (describe) \_\_\_\_\_  
 Will your girl be able to attend camp is she receives a partial scholarship?  Yes  No  
 Please explain why you are requesting financial assistance (use additional paper if needed). **List specific reasons.**

I understand all decisions by GSNEO are final.

Parent/Guardian signature \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

**CONFIDENTIAL**