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## Application for Financial Assistance Council Activities

### What is Financial Assistance?

GSWPA is committed to helping all girls participate in Girl Scouting regardless of their family's income. To encourage participation, GSWPA provides financial assistance to girl members only for membership and for one council-sponsored program and one council-sponsored camp per membership year.

### How Is Finance Assistance Awarded?

Financial Assistance is awarded based on the income guidelines of the [National School Lunch Program](#). If your girl member qualifies for free meals through the National School Lunch Program, she will qualify for 80% of the council activity fee to be paid for by GSWPA. If she does not qualify for free meals through the National School Lunch Program, she may still qualify for 40% of the council activity fee. Awarding financial assistance is subject to the availability of funds within GSWPA's operating budget.

### How Do I Request Financial Assistance?

You can either mail/email this form or submit the [online version of the form](#). If you have not completed your girl membership registration for this membership year, complete the [paper membership form](#) or the [online](#) form.

To submit by mail:

Data & Reporting – Financial Assistance  
5681 Route 6N, Edinboro, PA 16412

To submit by email:

[customercare@gswpa.org](mailto:customercare@gswpa.org)

GENERAL INFORMATION	
Girl's Name: _____ Parent/Guardian's Name: _____	
Troop Number (if applicable): _____	
Address: _____	
Street	City
State	ZIP Code
Home Phone: _____ Cell Phone: _____ Email: _____	
HOUSEHOLD INFORMATION	
Number of Family Members in Household: _____ Total Household Income (Combine all Sources): \$ _____	
Select any special circumstances that affects your family:	
<input type="checkbox"/> Currently Unemployed <input type="checkbox"/> Family Illness <input type="checkbox"/> Other. Please Describe: _____	
COUNCIL ACTIVITY	
Complete the following information about the council activity your daughter will be attending:	
Name of Camp Session/Program: _____	
Total Cost of Camp Session/Program: \$ _____ Date of Camp Session/Program: _____	
Are you registering with a buddy? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, name of buddy: _____	
Is there any special information that we need to know (e.g., allergies, dietary restrictions)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide: _____	
Emergency Contact Name: _____ Emergency Contact Phone Number: _____	
SIGNATURE	
Please select the checkbox and sign and date this form:	
<input type="checkbox"/> <u>Certification of Accurate Information</u> : I certify that all information in this application is true and accurate to the best of my knowledge. False information is a basis for disqualification for current and future consideration.	
<input type="checkbox"/> <u>Certification of No Money Owed to Council</u> : Financial Assistance will not be considered for any girls/family with delinquent monies due to the council. All outstanding monies owed to the council must be paid prior to distribution of the financial assistance awards.	
Parent/Guardian Signature	Date