

Youth Membership Assistance Application rev 02.08.2024

The Ozark Trails Council recognizes that some of our youth members cannot pay the full cost of being a member of BSA.

To meet this need, a limited financial assistance fund was developed to offset the cost of registration, uniforms,

and special district or council level activities.

After a youth's family, Scouting unit, and/or Chartered Partner contribute to the overall cost, youth members who apply and are approved for assistance only pay a percentage of BSA membership fees.

Assistance money is not transferable between Scouts.

Please contact your child's unit leader for a youth application if you have not filled out one already for your child's membership.

Youth Membership & Activity Assistance Application Instructions

PLEASE READ the following to avoid delays in processing a Scout family's need for financial assistance.

- 1. Confidential financial questions and circumstances must be answered by the family for full and fair financial consideration of need. The Council does not require the details of a financial situation, but there must be a statement more than "low income" or blank. Acceptable Example 1: Single parent, three children, high medical bills. Example 2: Working parent unemployed, three months.
- 2. The full amount of need requested paid by the Ozark Trails Council, combined with the contribution provided by the Chartered Partner, unit, or parent, must be on the form.
- 3. The unit leader must sign the assistance form to indicate unit committee approval of the fees being paid/requested.
- 4. Parents: <u>Please provide completed assistance form to your Scout's unit leader</u> who will ensure form completion and signatures.
- 5. Unit leaders: NEW membership assistance requests must be accompanied by a BSA youth application in addition to the assistance form.
- 6. Unit leaders: Please provide instructions for paying any amount not covered by assistance. Example: Pay difference from unit account.

Please check online for the most current pricing for membership and uniform costs.

Assistance will be calculated using the most current fees. Uniform pricing: https://www.scoutshop.org/

Youth Scouting Fees Effective APRIL 1, 2024	
All Cub Scouts, Scouts BSA, Venturing and Sea Scouting Participants	\$85.00 *
Youth Exploring Participants	\$50.00

Rank	Uniform Cost	Book Cost
Lion Shirt	\$14.99	\$12.99
Tiger/Wolf/Bear	\$32.99	\$23.99
Webelo	\$39.99	\$24.99
Scouts BSA	\$39.99	\$24.99

Unit Leaders: Prefilling your unit information on the form for new parents is helpful. Please provide the Scout's unit type, unit number, district and rank to parents filling out this form.

<u>District Name</u>	<u>District Abbreviation</u>	District Name	<u>District Abbreviation</u>
Nih-Ka-Ga-Hah (Joplin area)	NI	River Trails (Rolla area)	RT
Mo-Kan (Pittsburg, KS area)	MK	Ozark Howler (Spfd & Surrounding areas)	OH
Frontier (Bolivar area)	FT	, ,	



Youth Membership Assistance Application rev 02.08.2024

DATE:	PACK/TROOP/CREW #:	DISTRICT: NI MK	FT RT OH	
Scout's First Name:	Scout's La	st Name:	Scout's Age:	
Mailing Address:				
City:	State: ZIP:	Phone:		
	FAMILY INF	ORMATION		
Parent/Guardian First Name:	Parent/Guardian Last Name:		t UNIFORM SHIRT SIZE Extra SM SM MED LG XL 2XL	
F	INANCIALI	NFORMATIO	N	
Do you qualify for the free or redu	iced lunch program? YES or 1	NO		
Family Annual Income: () under \$10,000 () \$10,000 - \$ If over \$45,000, list amount:	15,000 () \$16,000 - \$20,000	() \$21,000 - \$25,000 () \$26, C	000 – \$30,000 () \$31,000 - \$40,000	
Has Scout applicant participated	in a money-earning project such as	Popcorn Sales? YES or	NO	
If NO, Why not?				
Does your unit participate in popo	corn sales? YES or	NO		
If NO, Why not?				
	ily Friends of Scouting? YES h require financial assistance. (Instruct			
TOTAL to		REQUEST SI ed by the u	J M M A R Y n i t	
Total Breakdown of Financial Aid (n/a if not applicable) Total Unit and Charter Partner Co	(\$35 MAXIMUM) Book Cost	\$ unit and	cial request must be filled out by the discussed with the unit committee. r Signature:	
T. 1. 5 " 0 1" " 1" 1				
Total Family Contribution toward cost above:			Parent/Guardian Signature:	
TOTAL ASSISTANCE FUNDS REQUE	ESTED OF COUNCIL from costs above	\$		
FOR COUNCIL USE ONLY:				
DATE RECEIVED:	REC	CEIVED BY:		
SCOUT EXECUTIVE APPROVAL S	SIGNATURE:	AMT APPRO	OVED \$	
DATE APPROVED:				