

Opportunity Fund Application

A fund to assist Scouting families in need with membership fees, Boys' Life subscriptions, books, uniforms and camp fees.

General guidelines for the awarding of Opportunity Funds are the state's poverty level guidelines and school lunch program but we will take other factors into account.

Through generous grants and contributions, the Mount Baker Council, Boy Scouts of America, is able to offer assistance to registered youth and adults so they may fully participate in the Scouting program.

The Opportunity Fund provides financial assistance for program requirements as well as camps and planned events which are appropriate to the BSA program and age level of the applicant. All youth and adults registered with the Mount Baker Council are eligible to submit this application for financial aid.

A Request for Financial Assistance for

Name of Recipient _____ Unit (Pack, Troop, Team, Crew) # _____

To be considered for Opportunity Fund assistance, applicants are expected to do their best at home, in school, and in the community; to be examples of the values found in the Scout Oath and Law.

All signatures are required for processing this application. Incomplete forms will be returned.

- The applicant does his best at home and at school (for applicants 18 and younger).
- He is obedient and follows the rules of the house. He does home chores responsibly.
- He cooperates with the members of his family. His academic work shows real effort to do his best.

Parent/Guardian (Print Name)

Signature

Date

Email address: _____ (for notification)

Cubmaster, Scoutmaster, or Advisor: The applicant does his best to be a good community citizen. Please explain why this applicant should be considered.

Cubmaster/Scoutmaster/Advisor (Print Name)

Signature

Date

Email address: _____ (for notification)

During the past year, did your unit participate in the Council's Popcorn Sale? Yes _____ No _____

During the past year, did the Scout participate in the Council's Popcorn Sale? Yes _____ No _____

Is your unit a Friends of Scouting qualifying unit? Yes: Presidential ___ Gold ___ Silver ___ No: _____

The following criteria and procedures apply when making a request: To receive a grant, all applicants must be registered with the Mount Baker Council; if not, attach a completed BSA application with this form. Assistance is based on funds available and financial need. The applicant is expected, as are all members, to participate in/or support the Council sponsored popcorn sales. Opportunity Fund grants will not reimburse for expenses already paid by the applicant.

Regarding Camp Requests: Deadline for application for any camp assistance is **MAY 1st**. Applications received **after MAY 1st** will not be considered unless additional monies become available. Mount Baker Council authorizes no more than 50% of the camp fee. **FUNDS ARE NOT AVAILABLE FOR USE AT OUT-OF-COUNCIL CAMPS.** Opportunity Fund grants, once awarded, are not transferable to another Scout. If an applicant approved for assistance does not attend camp for which the funds were requested then the Opportunity Fund grant is forfeited. Opportunity Fund grants for camps must be approved and the Scout's portion paid **prior** to attending camp. **The Friends of Scouting discount does not apply to Opportunity Fund recipients.**

Submit Completed Form to Mount Baker Council, BSA, Everett Service Center
1715 - 100th Place SE, Suite B, Everett, WA 98208 (425) 338-0380 FAX (425) 338-3477

Recipient (PLEASE PRINT) Unit (Pack, Troop, Team, Crew) # _____ District _____

Name _____ Age _____

Street Address _____

City/Zip _____ Phone _____

FAMILY INFORMATION (for applicants 18 years old and younger)

Father's Name _____ Home Phone _____

Father's Employer _____ Work Phone _____

Mother's Name _____ Home Phone _____

Mother's Employer _____ Work Phone _____

TOTAL ANNUAL FAMILY INCOME: \$ _____ (Gross)

OTHER CHILDREN IN THE HOME (list names and ages)

State the special financial need which makes it impossible for the entire fee to be paid by the applicant.

Please indicate which you are applying for:

Registration Fee* (Does Not include Unit Fees or Dues)

Boys' Life Subscription*

Uniform*— Includes Shirt, Patches, Hat, Neckerchief & Slide, Tiger or Cub Scout belt if applicable, (Badge-Magic is available upon request)

Handbook*

Note: A new Opportunity Fund Application must be completed and submitted each time assistance is requested.

* All grants expire 1 year from date of approval.

Apply for camp assistance after January 1st.

Cub Scout Day Camp Date _____

Webelos Resident Camp Date _____

Boy Scout Summer Camp Date _____
at Fire Mountain Scout Camp

Please indicate below how much of the fee can be paid and how much financial aid is being requested.

Total Fee for Camp \$ _____

Fee to be paid by Family \$ _____

Fee to be paid by Unit \$ _____

Amount requested \$ _____

(not to exceed 50% of the total camp fee)

Note: Friends of Scouting discount does not apply to camp fees for Opportunity Fund recipients.

Office Use Only:

Amount Approved _____ by _____ Date _____

Denied _____ by _____ Date _____

Date notified _____ Date recorded _____