



Traditional Youth Registration Assistance Request Form

Please complete the information below to the best of your ability while keeping in mind your true and accurate financial capabilities. Once submitted, this form will be reviewed by our council executives to assess the level in which assistance may be provided. *Please note that this form serves as a request for assistance and makes no guarantee for any subsidies.*

Family Information:

Scout's Name: _____ Grade: _____ DOB: _____

Address: _____ Email: _____

City/State: _____ Zip: _____

Phone: _____ Parent's Name: _____

Pack or Troop or Crew: _____ Unit Number: _____ District: _____

Select One:

<input type="checkbox"/> Fall Recruitment	<input type="checkbox"/> Unit Recharter
\$25 Joining Fee + \$6.00 per month through December, including current month	\$72 Annual National Registration Fee
<input type="checkbox"/> August = \$55.00	<input type="checkbox"/> September = \$49.00
<input type="checkbox"/> October = \$43.00	<input type="checkbox"/> November = \$37.00
<input type="checkbox"/> December = \$31.00	

Payment

1a. In accordance with the 9th point of the Scout Law – *Thrifty: A Scout works to pay their way and to help others.*
The Council encourages all members of our Scouting families to contribute as much as monetarily possible.
Here is what I can afford: \$ _____

1b. I am requesting assistance for registration fees in the amount of \$ _____

Council Support

- 2a. I have participated in the Council's popcorn fundraiser. My child sold \$ _____ last year.
- 2b. I have participated in the Council's camp card fundraiser. My child sold \$ _____ last year.
- 2c. I commit to participating in the upcoming camp card and/or popcorn fundraiser.

Parent's and Scout Leader's Certification

Parent's Signature: _____ Date: _____

Scout Leader's Signature: _____ Date: _____

*Mail this completed application to the Chattahoochee Council Office c/o Scott Rehrauer
at 1237 First Avenue, Columbus, GA 31901*

FOR OFFICIAL USE ONLY
Not Valid Without Signature for Council Authorization

Council Staff Signature: _____ Date: _____

Assistant Scout Executive Signature: _____ Date: _____