

Camp Lawton Financial Assistance Application

Date: _____ Youth's Name: _____

Unit Troop Crew Post Unit No. _____

Parent Name(s): _____

Address: _____ City: _____ Zip Code: _____

Phone: _____ Email Address: _____

Annual Combined Family Income: \$ _____ # of Family Members: _____

Briefly Describe Why You Need Financial Assistance (Use Back of Application if Necessary):

2019 Poverty Guidelines at 150%

<u>Persons in Family</u>	<u>Annual Income</u>	<u>Persons in Family</u>	<u>Annual Income</u>
1	\$18,735	5	\$45,255
2	\$25,365	6	\$51,885
3	\$31,995	7	\$58,515
4	\$38,625	8	\$65,145

For families/households with more than 8 persons, add \$6,630 for each additional person.

What is the applicant applying for?

Camp Lawton Summer Camp

(Indicate which week of camp specifically, including the date of the camp) _____

(Financial Assistance Application must be attached to the camp reservation form)

For the value of personal investment for the family, each family applying needs to make a contribution towards the total cost of summer camp requested above. Payments must be paid prior to Financial Assistance being granted. Applications without a contribution will not be considered.

Amount family will contribute \$ 90 Parent or Guardian's Signature _____

***** Please attach receipt of payment to application *****

For office use only

Date application was received: _____ Committee Approval: _____

Date of notification to family: _____ Amount of approved financial assistance \$ _____

Camp Lawton Financial Assistance Instructions

Before completing the attached Financial Assistance Application, please read the following Financial Assistance Instructions entirely and fully complete the application.

- Step 1: Before filling out the Financial Assistance Application, your youth must be registered in the Scouting Program or applying to join (registration assistance).
- Step 2: Fill out the Financial Assistance Application completely. The parent or guardian of the youth must fill out the application. Unit Leaders cannot fill out the application for youth, unless it is your child. Applications that are received and are missing information will not be considered.

*Fill out the personal information at the top of the application.

*Be specific as to what you are applying for.

*Please indicate clearly which week of camp your youth will be attending and include the camp date. Financial Assistance will only be approved for Catalina Council sponsored camps.

***For the value of personal investment for the family, each family applying needs to make a \$100.00 contribution per Scout towards the total cost of summer camp requested above. Payments must be paid prior to Financial Assistance being granted. Applications without a contribution will not be considered.**

- Step 3: Once the Financial Assistance Application has been filled out and payment receipt has been attached, please mail or deliver the application to:

Boy Scouts of America, Catalina Council
2250 E Broadway Blvd.
Tucson, AZ 85719

- Step 4: Please allow a minimum of 2 weeks for processing. Once a decision has been made regarding your application, you will receive a letter or email informing you of your application status and any additional information you may need.

For any questions or concerns regarding the Financial Assistance Instructions, Application, or process, please contact Joanie @ Joanie.LeeRivard@scouting.org or (520) 750-0385.