



Financial Assistance Request for Membership Dues

Instructions

1. This form must be attached to a completed membership form in order to be processed
2. Complete a separate form for each person requesting assistance
3. Mail this form with the membership form to:

Girl Scouts of Eastern Missouri, 2300 Ball Drive, St. Louis, MO 63146

Applicant Information

Full Name of applicant: _____

Applicant is a: Girl (under age 18) Adult

Troop Number: _____

Check the range of your total household income over the last year (include all sources of income, such as child support, unemployment, disability, social security, public assistance, etc.):

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$14,999 | <input type="checkbox"/> \$35,000 - \$49,999 | <input type="checkbox"/> \$75,000 - \$99,999 |
| <input type="checkbox"/> \$15,000 - \$34,999 | <input type="checkbox"/> \$50,000 - \$74,999 | <input type="checkbox"/> \$100,000 or more |

Please indicate which product programs the applicant has participated in within the last year:

Fall Product program Cookie program Neither, please explain: _____

Is there a special circumstance you would like for us to consider when processing this request?

Payment Information

Please select your Membership Option:

- Annual Membership fee: **\$25**
(membership valid from October 1 through September 30)
- Extended Year Membership fee: **\$35**
(only for new members, this membership is valid from May 1 through the next September 30)

Girl Scouts of Eastern Missouri has limited scholarship assistance funds available. Please consider if your family or troop can pay a portion of the membership cost. Any amount you can contribute allows us to serve more girls.

Amount Enclosed: _____

Parent or Guardian Signature: _____ Date: _____