

Group Financial Aid Request

The Service Unit Manager, Leader or other appropriate volunteer should complete this form. If assistance for membership registration is requested, this form should be included with the registration packet given to the Service Unit Registrar. If other assistance is requested, this form should be sent to your Regional Office.

Date: _____ Group #: _____ Leader: _____

Address: _____

Phone Number: _____ E-mail _____

Financial Aid Requested:

Membership Dues	\$10.00 x _____ girls	= _____
Membership Dues	\$10.00 x _____ adults	= _____
or other	\$ _____ x _____ girls	= _____
Start Up Fund	\$ 2.00 x _____ girls	= _____
Items from Our Store (list in box below)		= _____
Total Requested		\$ _____

If a girl's family, group or community can contribute some amount to her membership fee, please use other line for request.

Check appropriate:

Registration Attached Send Store Item

Other Instructions:

Describe circumstances necessitating financial aid: (no names please)

Recommended by: _____ Date: _____
Service Unit Manager

Regional Office Approval _____ Date: _____
Account Number: 8930- _____

List items Requested from Our Store Here

- 1.
- 2.
- 3.
- 4.