



Elgin Service Center
12N124 Coombs Road
Elgin, IL 60124
847-741-5521

Freeport Service Center
5040 Business Rt. 20 W.
Freeport, IL 61032
815-235-8777

Rockford Service Center
2101 Auburn Street
Rockford, IL 61103
815-962-5591

Sugar Grove Service Center
200 New Bond
Sugar Grove, IL 60554
630-897-1565

Financial Assistance Request

(DO NOT submit with spring registration — MUST submit in current membership year.)

Girls who would otherwise be unable to be active members of Girl Scouts of Northern Illinois may request financial help. All financial assistance requests must be submitted in writing by the parent/guardian. Mail or fax this application to your Girl Scout Service Center for consideration. Girl registration must be processed before assistance is awarded. All requests will be kept confidential and awarded at the discretion of Girl Scouts of Northern Illinois based on the needs of the individual family and the availability of funds.

Assistance Requested:

All requests for troop/group dues should be reasonable amounts, and the girl must be an active troop/group member. Total financial assistance request not to exceed \$25 in a given membership year. Assistance for national dues may be requested by checking the box on the membership registration form.

Form with checkboxes for: Annual Troop/Group Dues \$, GS Daisy Tunic or vest - size S M L XL, Sash - size S M L XL, Vest - size S M L XL, Girl Scout Brownie book set, Girl Scout Junior book set, GS Cad/Sr/Ambass IP Book/ Handbook, Journey/Focus Book. Includes fields for Journey Series Title and Focus Book Title.

Girl Name _____ Troop/Group # _____ Level _____

Please describe in full detail specific reason for requesting assistance (please print): _____

Parent's/Guardian's Signature _____ Date _____

Parent/guardian will be notified via mail of assistance awarded. Awards will be issued to the troop/group.

Leader's Name _____ Phone (_____) _____

Address _____ City _____ Zip _____

Service Unit _____

Requires the signature of two leaders: _____

Leader's Signature _____ Date _____

Leader's Signature _____ Date _____

FOR OFFICE USE ONLY:

Form for office use only containing fields for: CHECK REQUEST AMOUNT \$, CHECK REQUEST DATE, MAIL TO TROOP/GROUP #, CHARGE TO: MEMBERSHIP, MEMBERSHIP & COMM. DEV. SPECIALIST SIGNATURE, SERVICE CENTER.