

REQUEST TO USE SPECIAL ASSISTANCE FOR EVENT FEES
(Including Camp) - \$ ONLY

(Pack/Troop/Crew/Post) _____ would like to request \$ _____ from
the Blue Ridge Council, BSA Special Assistance Fund.

District: _____ County: _____ Zip Code: _____

Event: _____ Event Cost: _____

Event Date: _____ Activity Account #: _____

ScoutReach Component (Circle One): **Program Aide** **Gap Funding**

Original Date of Unit Charter: _____ Total Years of Charter: _____

The requested money will be used as follows:

____ Youth = \$ _____

____ Leaders = \$ _____

Amount in Unit Account = \$ _____

Amount provided from unit = \$ _____

Grand Total Requested = \$ _____

We certify that _____ is an active unit in good standing with the Blue Ridge Council, BSA.

Funds Requested by: _____ Date: _____

(District Executive)

Event Requested Certified by: _____ Date: _____

(Field Director)

Approved by: _____ Date: _____

(Assistant Scout Executive)

Approved by: _____ Date: _____

(Scout Executive)

Chartered Organization Leader Approval

District: _____ Chartered Organization: _____

My unit participates in: Popcorn/Peanut Sales Camp Card Sales

Leader's Name: _____ Unit Type/ #: _____

Scout/Adult names or attach list of names (write "See Attached"): _____

of youth this request receiving Blue Ridge Council Special Assistance for the first time this year: _____

of adults this request receiving Blue Ridge Council Special Assistance for the first time this year: _____

I understand that \$ _____ has been provided by the Blue Ridge Council, BSA from the Special Assistance Funding Program for our unit and verify that the above information is accurate. I hereby request these funds for the above stated purpose.

Unit Leader Signature: _____ Date: _____