



Girl Scouts of the Missouri Heartland, Inc.  
**Membership Financial Assistance**  
 for Girl Scouts of the USA National Membership Dues

Please complete this form in its entirety and attach to the Membership Registration Form. Incomplete forms will be denied.

**Request for:**  Girl  Adult

Name \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Girl Scout Affiliation (check all that apply)**

- Girl Member of Troop Number: \_\_\_\_\_
- Individually Registered Girl
- Leader or Co-Leader
- Registered Adult
- Service Team Member  
 Service Unit Number: \_\_\_\_\_  
 Position: \_\_\_\_\_
- Trainer
- Other: \_\_\_\_\_

**Program Age Level**

- Girl Scout Daisy (grades K-1)
- Girl Scout Brownie (grades 2-3)
- Girl Scout Junior (grades 4-5)
- Girl Scout Cadette (grades 6-8)
- Girl Scout Senior (grades 9-10)
- Girl Scout Ambassador (grades 11-12)

Amount of Financial Assistance Requested \$ \_\_\_\_\_  
 National Membership Dues are \$12.00 per year. Families are encouraged to contribute what they can.

**Participation in Council-Sponsored Product Programs**

- Fall Product Program
- Girl Scout Cookie Program *Cookie Credit Earned: \$* \_\_\_\_\_  
*Cookie Credit Gift Card #* \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(Make sure to include 2-digit security code located on back of card).

**Reason(s) for Financial Need**

Annual Household Income:  \$0 - \$20,000  \$20,001 - \$30,000  \$30,001 - \$40,000  
 \$40,001 - \$50,000  \$50,001 - \$60,000  \$60,001 and up  
 Number of Household Members: \_\_\_\_\_ Other pertinent information: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**(Requestor: please complete this section of the form for office records)**

Request for  Girl  Adult Name \_\_\_\_\_  
 Requested by \_\_\_\_\_ Relationship to individual listed above \_\_\_\_\_  
 Daytime Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

For Office Use Only			
<input type="checkbox"/> <b>Approved</b>	Amount Approved \$ _____	Approval Code _____	Date _____
<input type="checkbox"/> <b>Denied</b>	Reason for Denial _____		Date _____
Official Council Signature _____			

