

# Opportunity Fund Application

*Fee support funds are limited and subject to availability.*

**APPLICATION FOR FEE SUPPORT. COMPLETE IN FULL IF NEEDED. SUBMIT WITH YOUR CAMP REGISTRATION.**

Girl's Name \_\_\_\_\_ Troop # \_\_\_\_\_

I am requesting Opportunity Funds for my daughter/dependent in the amount of \$ \_\_\_\_\_ for:

**Name of Camp** \_\_\_\_\_ **Camp Date** \_\_\_\_\_

## **FAMILY INCOME INFORMATION** (Please Print)

(All information on this form is kept strictly confidential.)

Name of Parent/Guardian \_\_\_\_\_ Phone # \_\_\_\_\_

Relationship to girl \_\_\_\_\_ Number in household \_\_\_\_\_

Occupation \_\_\_\_\_ Gross monthly income (before taxes) \_\_\_\_\_

Employer \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Did the girl participate in the last Cookie Program?  Yes  No

Has the girl received fee support before?  Yes  No If so, when? \_\_\_\_\_ Amount \$ \_\_\_\_\_

**Reasons for requesting support** \_\_\_\_\_

\_\_\_\_\_