

Adult Opportunity Fund Application

P:304.345.7722 · F: 304.345.6427 · www.bdgsc.org

Based on need, Girl Scouts of Black Diamond Council will offer funds to adults who request financial assistance. Adults can apply for assistance with background check fees, member-ship and learning opportunities.

Eligibility

- Adult must be a registered Girl Scout member if applying for Opportunity Funds for background check fees and/or learning opportunities.
- · Applicant would be unable to participate in the activity unless Opportunity Funds are received
- · Applicants may be eligible for Adult Opportunity Fund up to twice a year, if the second experience is significantly different from the first.
- · Applicant can't owe debt to GSBDC.

Instructions

- · Please print clearly with blue/black ink or type.
- · Forms cannot be transferred from one event to the next.
- · A reason for request must be provided. Incomplete forms will not be processed.
- The application must be completed by the person requesting funds.
- Please mail Adult Opportunity Fund Application with the appropriate form (application, screening, learning opportunity or membership).
- · One Adult Opportunity Fund Application must be completed for each request, for each person.
- GSBDC makes every effort to provide financial support so that no one is denied participation in a Girl Scout experience due to lack of funds, however, Opportunity Funds are limited.
- Adult Opportunity Fund Application are supplementary.

		request is for: O Adult Learning Opportunity O Volunteer Background Check O Girl Scout Volunteer nbership Is the applicant a registered Girl Scout member? O Yes O No						
	If application is for an adult learning opportunity, please list the following: Name of Adult Learning Opportunity: Date of Adult Learning Opporutunity: Adult Learning Opportunity Code: Total Cost:							
	Amount family is willing	nount family is willing to pay:						
	Amount troop is willing	g to pay:						
	Amount requested:							
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3	Local Area	Volunteer Position						
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Ž	Applicant's Name: Fir	pplicant's Name: First		Last		Troop #		
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Address Apartment								
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ৰ্∣	City		State	Zip	Code	County		
Phone Cell Phone								
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⋖	E-Mail Address I wish to opt in: O Yes, I will help GSBDC use resources wisely and receive my communications via e-mail rather than mail.							
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	Employer	Imployer Occupation						
	Household Income:		O \$10,000 - \$20,000	O \$20,000 - \$40,000	Numi	per in household:		
		0 \$40,000 - \$60,000	○ \$60,000 - \$80,000	○ \$80,000 or more				
	Explain reason for request, including any extenuating circumstances or support comments:							
	Explaint Cocort for request, meading any extendating on confictations of support comments.							
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ξ.	In utilizing this form, you are agreeing to comply with all registration procedures, and certify that the applicant is a registered member of Girl Scouts of the US.							
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A l	Signature of Applicant Date							
						E Doto:		

FAX 304-345-6427

- · Must pay with Credit Card
- \bullet GSBDC cannot confirm receipt of FAX
- Do not mail original form once fax is sent

MAIL

Girl Scouts of Black Diamond Council PO Box 507 Charleston, WV 25322

REMINDERS• Consider using priority mail to ensure timely receipt.

 Allow up to 10 days for delivery recommended.

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