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### Request for Financial Assistance

Important:

Attach proof of income which includes all forms of income, specifically your 2 most recent paystubs AND the first page of your most recent Federal Tax Return.

If information is not completed; your application may be delayed.

Member's Name: \_\_\_\_\_  
(please list all member's that you are requesting assistance for)

Parent/Guardian Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone/Email Contact Information: \_\_\_\_\_

Period of Assistance (circle one: school year/summer): \_\_\_\_\_ to \_\_\_\_\_

Which site/school does your child(ren) attend? \_\_\_\_\_

How many people are living in your household (including yourself and the member)? \_\_\_\_\_

Have you received financial assistance from the Boys & Girls Club in the past? \_\_\_\_\_

Please list all other sources of income other than from employment here (i.e. Social Security Disability Income, Alimony, Child Support). Please indicate monthly amount received: \_\_\_\_\_  
\_\_\_\_\_

Briefly explain why you need financial assistance from the Boys & Girls Club of Frederick County. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By my signature I do verify that the above information, to the best of my knowledge, is correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Note: Every member must register and pay the membership fee regardless of whether they are approved for financial aid. Financial aid begins (if approved) the first of the month after the application has been approved. You will be contacted, at the phone number that you provided above, if your application has been approved. You will then receive written notification of your financial aid and will be required to sign a financial obligation letter. Please feel free to contact Lara Stine at [laras@bgcfc.org](mailto:laras@bgcfc.org) if you have any questions.