



Helping Hands Fund Application Individual Girls

Section 1: Contact Information

Contact person:
(person applying for funding): _____

Area: _____ District: _____

Activity funding is for: Unit Event Other

Please provide details:
(Unit information, event name, etc.)

Section 2: Budget

Expenses of the activity (please be specific, examples: registration fees, uniform costs, event registration subsidy):

Item	Cost
• _____	_____
• _____	_____
• _____	_____
• _____	_____
• _____	_____
• _____	_____
• _____	_____
	Total expenses: _____

Funding (funding can come from parent/guardian, district or area council, grants and donations or other sources):

Funding source	Amount
• _____	_____
• _____	_____
• _____	_____
• _____	_____
	Total funding available: _____

Area Commissioner name: _____ Date: _____



Manitoba Council

**Helping Hands Fund Application
Applicant Reference**

Please indicate to the best of your knowledge why this girl should receive financial assistance.

Name of person requiring financial assistance: _____

Please list reason(s) why financial assistance is necessary:

Reference name: _____

Date: _____