

**National Smokejumper Association  
Good Samaritan Fund**

**Request for Assistance**

**(Assistance may range from \$250-\$2,500 per approved request and based on resources available.)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Land Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Training Base \_\_\_\_\_ Rookie Year \_\_\_\_\_

Reason for requesting assistance: (circle all that apply)

Medical Bills   Natural Disaster (wind, fire, flood, earthquake, etc)   Crime Victim   Property Damage/Loss

Other reason (please describe) \_\_\_\_\_

Briefly explain the situation and the need for assistance \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will insurance cover any portion of the situation described above?    Yes    No

If the answer is 'Yes' what % will be covered? (Circle the appropriate answer)

Less than 25%   25-50%   51-75%   76-100%

What other sources of assistance are being sought? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Submitted by: \_\_\_\_\_ Date \_\_\_\_\_

**The National Smokejumper Association,  
through a cadre of volunteers and partnerships,  
is dedicated to preserving the history and lore of smoke jumping,  
maintaining and restoring our nation's forest and grassland resources,  
responding to special needs of smokejumpers and their families and  
advocating for the programs evolution.**

**Our values are comradeship, education, pride in work well done, and loyalty.**

**Disposition of Request for Assistance**

Date of Board action \_\_\_\_/\_\_\_\_/\_\_\_\_

Action taken by Board: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Authorized by: \_\_\_\_\_

Board Position: \_\_\_\_\_

Amount of assistance provided: \$ \_\_\_\_\_

Check # \_\_\_\_\_

Date \_\_\_\_\_