

All Scouts must be signed up for camp with the Pack/Troop prior to submitting this form.

DUE IN THE SCOUT OFFICE NO LATER THAN MAR.15, 2021, Attn: Camping Office.

- Please send separate application for each scout. ALL sections must be completed in full.
• Incomplete applications cannot be processed and will result in return of the application.
• For Special Circumstances contact the Assistant Scout Executive and/or the Program Director.

Section A - General Information

Camp Program (check one): Boy Scout Camp ___ Cub Scout Camp ___ Birchbark ___ NYLT ___
Camp Dates: ___ District: ___ Pack #: ___ Troop #: ___ Crew #: ___
Scout's Name: ___ Phone: ___
Address: ___ City: ___ State: ___ Zip: ___
Email: _____

Size of family: #Youth ___ #Adults ___

Are there other Scouts (besides applicant) in your household going to camp this year? [Yes / No] How many? ___

How much assistance are you requesting? \$___ (Campership is based on camp fee less bunk deposit)

How much assistance will you be receiving from your Pack/Troop/Crew? \$___

What is your total household yearly gross income? \$___

Section B Parents'/Guardian's Information (Must be completed in full)

• Father's Name: ___ Phone: ___

Address (Street, City, State, Zip): _____

Employer: _____ Gross Income: _____

• Mother's Name: ___ Phone: ___

Address (Street, City, State, Zip): _____

Employer: _____ Gross Income: _____

• Guardian's Name: ___ Phone: ___

Address (Street, City, State, Zip): _____

Employer: _____ Gross Income: _____

• Other Income (i.e. Welfare, Child Support): _____

Explanation of Need - The explanation greatly influences the amount approved. Please provide as much detail as possible. Feel free to attach additional pages. _____

I certify that all of the information contained in this application is true and correct

Parent or Guardian Signature: _____ Date: _____

Scouts Name: _____

Section C – Top Unit Leader’s Endorsement (A Unit Leader is a Scoutmaster, Cubmaster, or Committee Chairman)

Top Unit Leader’s Name: _____ Phone: _____

Address: _____ City _____ State _____ Zip _____

Did your unit participate in the Council’s annual popcorn sale (circle one)? Yes / No

 If yes, did the Scout sell (circle one)? Yes / No

With the exception of Popcorn, did your unit have fundraisers to help scouts to go to camp? Yes / No

 If yes, how much assistance will the scout receive \$ _____

Did your unit participate in the Council’s Friends of Scouting campaign (circle one)? Yes / No

Is this scout an active member of your unit rarely missing meetings/activities? Yes / No

Has this scout previously attended summer camp? Yes / No

Briefly explain why the Scout deserves a campership (Note: This **must be completed** to be considered):

As unit leader, I hereby certify that our unit committee has confirmed the circumstances, and to the best of our knowledge the need reflected is accurate.

Top Unit Leader’s Signature _____ Date: _____

Remember: The Scout **MUST** be signed up for Camp prior to submitting this form, however no fee is due until the notification letter from The Council Service Center is received. No late fees will apply.

For Council Use Only

Date Application Received: _____ Amount Requested _____ Unit Payment _____

Total Camp Fee: _____

Approved: _____ Disapproved: _____ Reason: _____

Reviewed By: _____ Date Reviewed: _____

Amount Awarded \$ _____

Date Mailed to Parent/Guardian: _____ Date Mailed to Unit Leader _____