CAMPERSHIP ASSISTANCE APPLICATION

Purpose: To make participation available to deserving youth who would otherwise be unable to attend camp. In administering funds, great care must be exercised in order that only those youth who <u>need</u> and <u>deserve</u> financial assistance shall be aided, and that the details shall be handled in such a way as to cause no embarrassment to the youth or his family. All youth who receive camperships will be required to earn or provide part of the fee, in keeping with the Scout Law-"A Scout is Thrifty"-unless conditions known to the Scout leader are such that this is impossible.

Applications must be returned to the Scout office as soon as possible, but no later than May9th. An applicant has a better chance of receiving a campership if his application is received at the Scout office earlier, as money is limited. Under normal conditions, the campership approved is 50% of the total fee. If there are unusual circumstances, the Campership Committee will consider a larger portion of the fee. Applications received after May 9th will be expected to pay 50% of the camp fee, as funds will be limited if deadlines are not met.

A <u>deposit of \$10.00</u> needs to be paid when the application is turned in at the Scout office. The balance is due no later than 14 days prior to the event.

Date of Activity:				
Type of Activity:	Summer Camp Cub Resident Camp-Wolf/I Cub Day Camp	Bear	Junior Leader Training Cub Resident Camp-Webelos	
Applicant Information Name:	n:		Phone:	
Address:				
City:		State:	Zip Code:	
Pack#:Troo	op#:Post#:	District:_		
State specific reason f	or need of campership:			
Total Fee for Camp: Am't Paid by Youth: Am't Paid by Unit: Am't of Campership	\$	\$Unit Leader Certification: \$Unit Leader, please indicate your knowledge of the above family's financial situation and their need for assistance: ed		
	le to attend camp if they were r e:		al assistance? Date:	
the campership assistan		portion and the u	out will be notified by letter of the amount on it portion (if applicable) be paid two week be cancelled.	
NOTE: All application	ns will be reviewed by the Can	npership Commit	ttee for approval on published meeting date	
FOR OFFICE USE O	NLY:			
			8Receipt #: e:	
COUNCIL ACTION:				
	Aŗ	oproved by		
Posted to camp/activity		opioved by	Date:	
Letters sent to Scout/Le				