



Must be submitted by April 1.

* Required

DISCLAIMER

- 1 form per Scout
- Funds subject to availability
- Camperships awarded based on need
- This form is to be used for assisting youth pay for camp (resident camp, family camp, day camp, winter camp) OR NYLT.

CONTACT INFORMATION:

*Scout Name:

*Address:

*Phone Number:

*Email:

*City:

*District Name:

*State:

*Zip Code:

*Unit No:

Please list all fundraisers the Scout has participated in:

Amount of funds family is able to contribute:

Amount of funds the unit is able to contribute:

Please specify the camp you would like to attend:

Boy Scout Summer Camp:

Cub Scout Summer Camp:

Preferred attendance dates for session:



Parent Statement Concerning Campership Need. (Please be specific):

*Signature of Parent/Legal Guardian:

*Date Submitted:

TO BE FILLED OUT BY UNIT:

Unit Leader (COR, Committee Chair / Cubmaster / Scoutmaster/ Crew Advisor) verifying:

Verify popcorn sale participation.

Verify Friends of Scouting participation.

Other fundraising activities verification:

*Unit Leader Signature:

*Date Submitted:

OFFICE USE ONLY:

*Date Submitted:

*Date Evaluated:

*Approved Date:

*Approval Signature:

