Caddo Area Council Campership Application

Purpose:

To provide every Caddo Area Scout the opportunity to attend Camp Preston Hunt and/or out of Council Camps.

Packs and Troops that apply for Camperships must sell Candy Bars and/or Popcorn.

The camp scholarship program is made possible through the generosity of people who donate funds during our Annual Golf Tournament. These scholarships are available only to registered Caddo Area Council Scouts who have a legitimate financial need. All information is handled with confidentiality.

In keeping with the Ninth point of the Scout Law, "A Scout is Thrifty," recipients are required to provide part of their camp fee. This can be paid by the family or earned by the Scout through participation in a money earning project such as selling candy bars and/or popcorn.

Applications must be submitted 3 weeks prior to qualify for assistance.

Scout's Name:		
Parent Name:		
Phone Number: ()	Email:	
Home Address:		
City:		
State:	Zip:	
Pack Troop	Crew	
DATES ATTENDING CAMP PR	RESTON HUNT:	
Cub Scout Day Camp	Cub/Webelo	s Resident Camp
Cub Scout Fall Family C	Camp	
Scouts BSA Camporee	Winter Cam	n

	_OA (please li	st the event)			
	_High Advent	ure Camp (please l	ist the event)		
Total fe	e for camp:	\$			
Amount	supplied by tro	oop, youth or fami	ly: \$		
Balance	e Due requeste	d from Campersl	nip funds:	\$	
		Money Earnin	g Projects		
	Did Pack/Tr	roop sell candy bars?	Yes	No	
		And/or	•		
	Did Pack/Tr	roop sell popcorn?	Yes	No	
		ible for a campership ement is waived. (i.e.,			
	State 1	the specific reason/ no (All information strict)	_	ship:	

Signature of Parent or Guardian
 By signing this application, I hereby verify the need for the award as stated above and that the applicant: Is active in the unit, attending the majority of unit meetings and activities Understands and demonstrates Scout Spirit. Shows an interest in advancement.
Signature of Unit Leader:
Unit Leader Phone Number: ()
Unit Leader Email:
SPECIAL NOTE TO UNIT LEADERS: The unit leader will be notified when funds are allocated. We request you follow up with the youth and his parent(s) to assure their portion of the fee is paid the week
before camp starts. If additional fees are not paid the week before camp starts, the request may be cancelled. Registrar Signature:
Registrar Signature:
Registrar Signature: Date application received:
Registrar Signature: Date application received: Campership Chair Signature:
Registrar Signature: Date application received: Campership Chair Signature: Date application approved:

Caddo Area Council Boy Scouts of America