

2023 CAMBERSHIP APPLICATION – HEART OF VIRGINIA COUNCIL

Scout's Name: _____ Age (as of 6/1 current year): _____
Address: _____ City: _____ State: _____ Zip: _____
Unit #: _____ Troop _____ Pack _____ Crew _____ Ship _____ (check one)

Parent; briefly explain your need for Campership assistance:

My Scout is planning on attending (check one):

- () Camp T. Brady Saunders week # _____ or the week of _____
() Cub & Webelos Adventure Camp Session # _____
() Cub Scout Day Camp week of _____

I will be paying: \$ _____ Towards my Scout's week at camp
Our Pack/Troop will pay: \$ _____ Towards my Scout's week at camp
I am requesting Campership assistance of: \$ _____

Which Council sponsored fundraisers did the Scout participate in during the year? (check all that apply)

Scout sold Popcorn _____ Scout sold Peanuts _____ Scout sold Camp Cards _____

I understand that this is an application, and in no way guarantees a Campership. I further understand that Heart of Virginia Council ordinarily awards **partial** Camperships in belief that most Scouts can and should earn part of their camp fee. Camperships are limited to Heart of Virginia Council Scouts Only

Parents Name: _____
Address: _____ City: _____ State: _____ Zip: _____
E-mail address: _____
Parents Signature: _____ Cell Phone: _____

Applications must be received by Council no later than March 15th. Applicants will be notified of decision by April 10th.

Mail Applications to:

Heart of Virginia Council
8090 Villa Park Drive
Henrico, VA 23228

This applicant is a **registered** Scout within my unit:

Unit Leader's Name _____
E-mail address: _____ Phone # _____

Unit Leader's Signature: _____ Date: _____

Service Center Use Only

Date Received in Office: _____ Approved by: _____ Campership Amount Awarded: \$ _____