



OFFICE USE ONLY		
Date Received:		
Approved:	YES	NO
Amount: \$		

Campership Request

Council Summer Program

2017 Campership Application Deadline: April 3, 2017

Mail or transmit to: Mid-America Council, Boy Scouts of America
12401 West Maple Road
Omaha, NE 68164-1853
fax: 402-431-0444, email: mac@scouting.org

Purpose: The purpose of the council campership program is to make summer camp available to deserving Scouts who could not otherwise afford the attendance fees. **This program is not intended to provide all of the camp fees.** Paying a boy's way to camp is a joint effort of the unit (ie Pack, Troop), the unit's chartering organization, the Scout and his family, and the campership program. Details of the application are confidential. The applying Scout **MUST** be registered in the unit in which they are applying to attend camp with. This application **MUST** be signed by the parent(s) and unit leader (ie Cubmaster, Scoutmaster) of the Scout requesting the campership. **Incomplete applications will not be returned nor considered.**

CAMPERSHIP APPLICANT (SCOUT'S INFORMATION):

Name: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone: _____ Age: _____

SCOUTING REGISTRATION:

(circle) Pack / Troop / Team / Crew #: _____
District: _____
Applicant's # of Years in Scouting: _____

FAMILY:

Single Parent Both Parents other: _____
Total # in Household: _____ # Under 18: _____
Total Yearly Family Income: \$ _____

CAMP EXPERIENCE SEEKING ASSISTANCE:

(choose one)
 Cub Scout Resident Camp at Little Sioux Scout Ranch
 Cub Scout Day Camp (indicate location/dates below)
 Cub Scout Family Weekend (indicate location/dates below)
 Boy Scout Resident Camp at Camp Cedars
 other (Jubilee, High Adventure, T-SHAB) (provide details)
Location: _____
Dates: _____

Is a parent attending this experience as well? yes / no
Is a sibling attending this experience as well? yes / no
Have you received a campership in the past? yes / no

Please attach additional pages if needed to the following question: *(to be completed by parent/guardian)*

(from the parent/guardian) Please provide an explanation for your request: _____

(over)





BOY SCOUTS OF AMERICA®
MID-AMERICA COUNCIL

FAMILY PARTICIPATION: *(to be completed by parent/guardian)*

2016 Investment in Character Donor: yes / no
 2017 Investment in Character Donor: yes / no
 Gross Amount of 2016 Popcorn Sales: \$ _____
 Number of 2016 Camp Cards Sold: _____

UNIT SUMMARY: *(to be completed by unit leader)*

2017 Investment in Character Presentation Date: _____
 Total 2016 Gross Popcorn Sales: \$ _____
 Total 2016 Number Camp Cards Sold: _____
 Participating in 2017 Camp Card Sales: yes / no

CAMP FEES & ASSISTANCE:

Total Camp Fee: \$ _____
 Total Assistance Requested: \$ _____
 Contribution of Unit: \$ _____
 Contribution of
 Chartering Organization: \$ _____

General Information *(Please read carefully)*

1. All Campership applications must be received by the published deadline. Late applications will not be considered.
2. All Campership applications must be filled out **COMPLETELY** and **ACCURATELY**. Incomplete applications will not be returned nor considered. Applications without a brief explanation of why assistance is being requested will be considered incomplete.
3. Letters will be sent to the unit leader notifying them if a campership was granted, and in what amount. Parents will be notified as well, if an email address is provided.
4. All youth using council facilities, whether for short-term overnight or long-term summer camp periods are already subsidized, in part, by the council's yearly operating budget which pays for taxes, year-round camp rangers, maintenance, liability insurance, heat, light, etc. The community, through United Way allocations, the Investment in Character Campaign, popcorn sales, camp card sales, trust fund income, sponsorships, Order of the Arrow, and campership donations helps pay this cost.
5. No more than **1/2 of the total attendance fee** will be granted. Special hardship requests may require additional information and discussion with the Campership Committee and the Director of Camping Services.
6. All applications are reviewed, and approved or disapproved, by the Council Campership Committee. This committee is made up of volunteers from throughout the Mid-America Council. The decision of the Council Campership Committee is final.
7. Applications are accepted on an individual family's annual request only. A campership cannot be transferred to another camping season or to another registered Scout.
8. A Scout, who is awarded a campership, but does not attend summer camp, forfeits the campership.
9. Camperships are not granted to adults.
10. The remainder of the camp fee must be paid prior to attending Camp.
11. Camperships are issued only for Mid-America Council camps and to Scouts registered in the Mid-America Council.
12. Scouts from units that conduct an Investment in Character Campaign presentation and participate in popcorn and/or camp card sales may receive first preference.

I, (Unit Leader) _____, certify that the above information is correct to the best of my knowledge and that I have personally talked with this Scout and his/her family regarding their attendance at camp and have verified the need for this campership request.

***Unit Leader's Signature:** _____ **Date:** _____

Email: _____ Phone: _____

***Parent/Guardian Signature:** _____ **Printed Name:** _____

Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Phone Number: _____ **Email Address:** _____

