

Capitol Area Council Request for Campership Assistance

Camping is one of the methods of delivering the Scouting Program. The Capitol Area Council wants to make sure every Scout has an opportunity to have a mountain-top experience at camp. All Scouts who receive campership aid should earn or provide part of their fee, in keeping with "A Scout is Thrifty". This ensures that we can serve as many Scouts as possible with the funds available. We ask that all sections of the form be filled out completely.

To help ensure that we continue to receive financial gifts to keep these programs possible, you are asked to include a brief letter with your assistance request that can be shared with possible donors. We ask that this letter be from the Scout, and include what Scouting means to them and how attending this camp will have an impact.

In order to provide financial assistance, Units are encouraged to (check to confirm):

- Participate in the Capitol Area Council's popcorn sale.
- Participate in the annual Friends of Scouting campaign.
- I would like to learn more about participating in our Popcorn sale or Friends of Scouting.

How this form works:

1. A registered Scout would like to fully participate in Scouting; however, the cost of camp would create a hardship.
2. The Unit Leader, Family, and Chartered Organization Representative complete his/her sections; assessing potential contribution by the family and unit.
3. The completed form is submitted to the District Executive/Director for review (paper or digital copy is acceptable).
4. The council reviews the assistance request and contacts the family. **If approved the Scout family will be provided up to 50% of the cost of camp (subject to availability and budget) and only one campership will be awarded to a Scout per calendar year.**

Unit Leadership Section		
District Name:	Unit Type:	Unit Number:
Youth's First Name:	Youth's Last Name:	Youth's Rank:
Parent/Guardian Name:	Parent/Guardian Phone:	Parent/Guardian Email:
Unit Leader Name:		How much can the Unit Contribute?
		\$
Unit Leader Signature:		Date:

Family Section		
When did this Scout earn their last rank advancement?	Are other family members registered in Scouting? (if so, who)	Has this Scout received a campership in the past? (if so, when)
Annual Household Income (all sources): \$	Total Number of Household Members:	How much can the family afford to contribute? \$
Does the family receive free or reduced-price school meals? Yes No (Select One)		

Camp Information	
Camp Information (select one): <div style="display: flex; justify-content: space-around; text-align: center;"> Cub Scout Webelos Scouts BSA National Youth Leadership Training (NYLT) </div>	
Type of Camp (Day Camp, Summer Camp, Winter Camp, etc.):	Camp Dates:
Parent/Guardian Signature:	Date:

Chartered Organization Representative Section		
Chartered Organization Name:	Chartered Organization Representative Name:	How much can the Chartered Organization contribute? \$
Chartered Organization Representative Signature:		Date:

Council Section			
Total Fee: \$	By signing below, I confirm the validity of the attached application. Finding all information presented is accurate, approve this individual application for campership assistance.		
Family Contribution: \$			
Unit Contribution: \$	District Executive/Director Name:	Field Director Name:	Scout Executive Designee Name:
Chartered Organization Contribution: \$	District Executive/Director Signature:	Field Director Signature:	Scout Executive Designee Signature:
Total Assistance Requested: \$	Date:	Date:	Date:

Account Debited: _____ - _____ - _____