



Stonewall Jackson Area Council, BSA

Campership Application



Note: Funds available for Camperships covered by this application come from funds restricted for use for **youth members** of the Stonewall Jackson Area Council attending council camp activities at **Council operated properties** and District Cub Scout Day Camps. Please read all instructions completely and fill in all spaces. Do not include extra paper with this application.

Cub Scout Day Camp



Applicant Name: _____ DOB: ____ / ____ / ____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ County: _____

Parents Name(s): _____ Phone: _____

If your child receives Aid to Families with Dependent Children (ADC), Foster Care of Children's Welfare Services, the following information must be supplied:

Client Identification Number: _____

Unit #: _____ Pack Troop Crew

District:

Massanutten Monticello Southern Valley

Return completed application no later than April 30, 2019 to:

Stonewall Jackson Area Council
Boy Scouts of America
801 Hopeman Parkway
Waynesboro, VA 22980

Campership Questions: (540) 943-6675, Fax: (540) 943-6676

GENERAL INFORMATION

The Council Camping Committee is concerned about the individual needs and the Unit's individual evaluation of the Scout for whom this request is made.

Generally, camperships are limited to no more than 50% of the activity cost. Each Scout, his family, unit or charter partner is asked to provide a minimum of 50% of the activity cost.

Camperships are not transferable, refundable and have no cash value.

Applications must be submitted no later than April 1, 2018. Applications received after April 1st will be reviewed but may not be granted due to limited funds.

All information in this application will be treated confidentially.

Campership funding support is offered for the following camping experiences:

- Camp Shenandoah Summer Resident Camp
- Camp Shenandoah Webelos Resident Camp
- SJAC District Cub Day/Twilight Camps
- NYLT Training Course

The Scoutmaster, Cubmaster or Venturing Crew Advisor of the packs, troops and crews are in the best position to have knowledge of Scouts and families in the unit who are most in need of assistance. By working through the Scoutmaster, Cubmaster or Crew Advisor, this will help identify any needs more accurately and readily. **This practice is not meant however to exclude parents or other leaders from directly applying for financial assistance, as long as requirements are met.**

INSTRUCTIONS

Please read all instructions completely and fill in all spaces. Do not include any additional paper.

CAMPERSHIP REQUEST

Please list the amount requested including costs provided by the family, and unit. Specific consideration will be given to those that include amounts of need, and not just the maximum amount allowable.

The ninth point of the Scout Law is "A Scout is THRIFTY." A Scout works to pay his own way. The Council Camping Committee is very interested in what the Scout has done to assist his family in providing him with this camping experience. This is a character building opportunity for the scout to learn the importance of being THRIFTY.

FAMILY INFORMATION

Briefly, describe the general circumstances that require campership assistance for the child to attend camp.

UNIT ENDORSEMENT

This area is extremely valuable to the Council Camping Committee. Failure of the Unit to provide this endorsement may result in the application being denied or delayed until further information can be obtained.

Information should be provided in this area as to the Scout's participation in the unit fundraising activities like popcorn sales.

In many cases, the unit will be aware of the financial need of the Scout. Confirmation of this fact or further explanation is helpful. Do not merely repeat information already provided.

In keeping with the policies of the Boy Scouts of America, the rules for acceptance and participation in camp programs are the same for everyone without regard to race, sex, creed, color, national origin, age or physical limitation.

Applicant's Name _____

Please Type or Print

Please check camp attending:

Camp Shenandoah Summer Camp Camp Shenandoah Webelos Resident Camp
Cub Scout Day Camp - District: _____ Other (Specify) _____

Date of Camp (Session):

CAMPERSHIP REQUEST

Cost of Camp \$ _____
Less Cost Provided by the Family: \$ _____
Less Cost Provided by the Unit: \$ _____
Less Cost Provided by the Chartered Org: \$ _____
Net Campership Request: \$ _____

Briefly, explain what the Scout has done to earn a portion of his camp fee. Include Council, unit and individual fund-raising activities.

Popcorn/Peanut Sales Year(s): _____ FOS Donation Year(s): _____

FAMILY INFORMATION

This section must be completed by the Scout's family. Briefly, describe the circumstances that require campership assistance for the Scout to attend camp. (i.e. number of adults in family, medical issues, etc.)

Total yearly net household income:

Under \$17,000	\$29,000 to \$34,000	\$47,000 to \$52,000
\$17,000 to \$23,000	\$34,000 to \$40,000	\$52,000 to \$60,000
\$23,000 to \$29,000	\$40,000 to \$47,000	Over \$60,000, list \$ _____

Name and Age of Other Children in the home: 1. _____ 2. _____
3. _____ 4. _____ 5. _____ 6. _____

In most cases camperships are not granted to those families who have an income over \$60,000.

Parent Signature: _____ **Date:** _____

Applicant's Name _____

UNIT ENDORSEMENT

Please provide as much information as possible to assist the Council Camping Committee in evaluating this application.

Unit Leader Name: _____

Home Phone: _____ Work Phone: _____

Signature: _____
(Unit Leader) (Registered Position)

Is this Scout a newly registered youth? Yes - Date Registered _____ No

Registered youth members who cannot pay the full cost of attending council Scouting events may apply for limited financial assistance (campership). This fund assists deserving youth members to attend local council events with a percentage of the cost based on need, but is not intended to provide the full fee. Families, units and/or the chartered partner are expected to provide a substantial portion of the fee. **Campership is aid for only ONE camping experience.**

Applicants for camperships **MUST** be a currently registered member of the Stonewall Jackson Area Council, BSA. Applications for unregistered persons and applications without proper signatures will be returned to the Unit Committee Chairman.



FOR COUNCIL USE ONLY:

Date Stamp

Approved Disapproved-Reason _____

Amount: _____ Date: _____