

\*\*\*Note: This form not sufficient for applicants from the Historic District (Rockingham County) \*\*\*

### Application for Assistance with Camp Fees

**Dear Parent:** District volunteers solicit funds from various sources to help Scouts who have aggressively tried to earn their own way to camp. If your Scout is in need of additional funds, please fill out and sign the application and forward it to your unit leadership by April 1st. The boy must raise some amount for his camp experience. The family and unit must also contribute before the boy is eligible for a campership. All camperships awarded based on need.

Scout's Full Name \_\_\_\_\_ Pack/Troop# \_\_\_\_\_

Mailing Address \_\_\_\_\_

Scout will enter grade \_\_\_\_\_ in September. Current Rank \_\_\_\_\_ Number of years in Scouting \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Home phone \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Work phone \_\_\_\_\_

**To help us in applying campership, please circle camp and give us the additional requested information.**

**Day Camp** Name of camp \_\_\_\_\_ Date \_\_\_\_\_

**Carpenter (resident camp)** Pack \_\_\_\_\_ Provo \_\_\_\_\_ Date \_\_\_\_\_

**Hidden Valley** Troop \_\_\_\_\_ Provo \_\_\_\_\_ Eagle \_\_\_\_\_ Voyager \_\_\_\_\_ Date \_\_\_\_\_

**Bell** Troop \_\_\_\_\_ JLT \_\_\_\_\_ Date \_\_\_\_\_

**White Mountain HAB** Program \_\_\_\_\_ Date \_\_\_\_\_

**National Jamboree**

<b>Cost for Camp</b>	=	\$ _____
<b>Amount Boy raised</b>	=	\$ _____
<b>Amount Family will provide</b>	=	\$ _____
<b>Amount Unit will provide</b>	=	\$ _____
<b>Total Campership requested</b>		\$ _____

**Reason Financial Assistance is needed** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Instructions for the Unit Leaders:**

Please forward this application to your District Executive no later than the April 15th. Money will be allocated after the April Round Tables. You will be notified by mail May 15th.

Cubmaster/Scoutmaster Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

Committee Chair Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

Amount Approved \$ \_\_\_\_\_

Recorded \_\_\_\_\_ Verified \_\_\_\_\_