

Application for Assistance with Camp Fees (Campership Application)

Dear Parent/Guardian: The Daniel Webster Council has pledged that no young person will be denied a Scouting summer camp experience due to financial hardship and therefore has established a Campership Fund to assist DWC Scouts who have aggressively tried to earn their own way to camp by participating in the council product sales program (Adventure Cards/Popcorn. Please fill out the form to the best of your knowledge, and then be sure to hand over to your Scout leader. The unit leader is then asked to complete and sign the application and forward it to the Daniel Webster Council. In keeping with the Scouting philosophy, we ask that every effort be made by your Scout or Venturer and their unit to provide a portion of the camp fee. All camperships are awarded based on need and recipients will be expected to write a "Thank You" letter to donors if an award in any amount is granted. If you have multiple scouts in need of camperships, please provide a form for each scout.

APPLICATION DUE DATE: April 15, 2020

PLEASE NOTE: *Incomplete or late applications will not be considered.*

Scout's Full Name: _____ Pack / Troop / Crew #: _____

Mailing Address: _____ Apt. #: _____

City: _____ State: _____ Zip: _____

Scout will enter grade ____ in September. Scout's current rank is: _____ Number of years in Scouting: _____

Parent/Guardian Name: _____ Home Phone: _____

E-Mail Address: _____ Occupation: _____

To help in applying the campership, please circle the camp and program and provide the dates attending:

Camp Name	Program		Dates Attending
<input type="checkbox"/> Day Camp:	Name of Location:		
<input type="checkbox"/> Camp Carpenter:	<input type="checkbox"/> With Pack (Chartered)	<input type="checkbox"/> Individual (Provisional)	
	<input type="checkbox"/> Akela Camp		
<input type="checkbox"/> Hidden Valley	<input type="checkbox"/> With Troop (Chartered)	<input type="checkbox"/> Individual (Provisional)	
<input type="checkbox"/> Camp Bell	<input type="checkbox"/> NYLT		
<input type="checkbox"/> Other DWC Program:	Description:		

COST FOR CAMP = (A) \$ _____ ("Early Bird Rate")

Amount youth raised in popcorn sales (net) = \$ _____

Amount youth raised in Adventure Card (net) = \$ _____

Amount Family will provide = \$ _____

Amount Unit will provide = \$ _____

Amount from other funds = \$ _____

TOTAL FUNDS FROM ABOVE = (B) \$ _____

TOTAL CAMBERSHIP REQUESTED = (A-B) \$ _____

(Amount cannot exceed half the cost of camp)

Scouts must submit to unit leader by **April 15**. Please estimate income from Camp Card Sales

Average Monthly Family Income: _____

Number of Scout Attending Summer camp: TWO THREE FOUR More? How many? _____

Our family pledged an amount to the Friends of Scouting (FOS) campaign.

We do not participate in Council Product Sales. If So, Why? _____

Please indicate why financial assistance is needed (continue on back and use additional paper if necessary)

Parent/Guardian Signature: _____ **Date:** _____

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Comments from parents:

Instructions for the Unit Leaders:

Please forward this application to **Daniel Webster Council, 571 Holt Avenue Manchester, NH 03109** no later than the April 15th. Notification by e-mail of the amount of the campership to be awarded will be made by May 15th. All campership recipients will be expected to write a "Thank You" letter to donors if an award is granted in any amount.

Comments from Unit Leader/Committee Chair:

CHECK ALL THAT APPLY FOR YOUR UNIT:

- FOS Date
- Sold Popcorn
- Sold Adventure Cards

Unit Leader Signature: _____ Date: _____ Phone: _____

Unit Committee Chair Signature: _____ Date: _____ Phone: _____

FOR COUNCIL USE ONLY:

Reviewed: _____ Approved: _____ Recorded: _____

Comments: