

**2010**

**APPLICATION FOR CONSIDERATION OF A CAMBERSHIP**

The Council Campership Committee, comprised of representatives for all Districts, awards campership upon approval only for programs offered by Three Fires Council. Camperships are limited to a **maximum of 50%** of the Early Bird Registration Fee for the program the Scout is attending. Due to the limited amount of funds available for Camperships, please provide as much information as possible when completing this form so that Campership can be awarded to the neediest of our Scouts. To avoid delays or returns, fill out this form completely. All information provided in this application will be kept in confidence. **Cubmaster and Committee Chairman signatures are required!**

Scouts Name: \_\_\_\_\_ Age: \_\_\_\_\_

Pack \_\_\_\_\_ Troop \_\_\_\_\_ Team \_\_\_\_\_ Crew \_\_\_\_\_ Unit \_\_\_\_\_ District \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Phone (Evening) \_\_\_\_\_ Phone (Daytime) \_\_\_\_\_

Program Scout is attending \_\_\_\_\_ Cub Day/Twilight Camp \_\_\_\_\_ Cub Family Camp  
\_\_\_\_\_ Webelos Resident Camp \_\_\_\_\_ Boy Scouts CFL

Date(s) Scout will attend camp \_\_\_\_\_

Early Bird Fee cost of camp \_\_\_\_\_

Amount of Campership Requested (Maximum 50% of Early Bird Fee camp cost)  
\_\_\_\_\_

State reason(s) why Campership is being requested (be specific) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want your Scout to attend Summer Camp? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will the Scout be earning his portion of the camp fee? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have the Scout complete this section

Why do you want to attend Summer Camp? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Number of people in household \_\_\_\_\_ Approximate annual family income \_\_\_\_\_

Number of other children in family attending Scout Camp \_\_\_\_\_

List the amount of each of the following will be paying towards the camp fee.....

\_\_\_\_\_ Scout \_\_\_\_\_ Family \_\_\_\_\_ Unit

\_\_\_\_\_ Other, be specific \_\_\_\_\_

Other Unit participation \_\_\_\_\_ Friends of Scouting \_\_\_\_\_ Popcorn Sale

Amount of Campership requested \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Unit Certification: We certify that this Scout is registered in our unit and is currently planning on attending the Three Fires Council camp program as indicated above. We feel this youth is deserving of financial assistance. These signatures are mandatory!

\_\_\_\_\_  
Unit Leader's Signature \_\_\_\_\_ Date \_\_\_\_\_ Committee Chairman's Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

In order to be considered, all Applications for Camperships must be received in the Council Service Center no later than March 31, 2010. Applications received after that date can NOT be considered. Applications will be reviewed at the end of April and notification will be mailed to you by April 30, 2010. The Early Bird Fee will be honored if the completed form and remaining balance is submitted by March 31, 2010.

Campership Applications are to be sent to:

Three Fires Council

Attention: Program Director

415 North 2<sup>nd</sup> Street

St. Charles, IL 60174

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For Office Use Only

Date Received \_\_\_\_\_ Amount Granted \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_