

**2011 Campership Application**

It is the intent of the Council Campership Fund to provide assistance to families experiencing financial hardship. Campership funds are made available to assist those Scouts with an extraordinary financial need to experience an outdoor Scouting adventure. Camperships are intended to support and supplement other sources of funding, including funds earned by the Scout, plus family, unit, sponsor and/or other sources. Funds are available only for Scouts attending an Iroquois Trail Council Camp.

Funds may be requested for up to 50% of the camp fee.

All information requested on this form must be completed for the Campership Application to be accepted for processing. All information on this form is confidential.

**YOU MUST USE A SEPARATE FORM FOR EACH YOUTH AND EACH CAMP.**

(Please Print)

Scout's Name \_\_\_\_\_ Age: \_\_\_\_\_ Pack/Troop/Crew# \_\_\_\_\_

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

County: \_\_\_\_\_ **and** District:  Towpath  Seneca  Nundawaga

Parent's Name \_\_\_\_\_ Phone \_\_\_\_\_

Email address: \_\_\_\_\_

Has the Scout received an Iroquois Trail Council Campership in the past? Year \_\_\_\_\_ Amt. \$ \_\_\_\_\_

Indicate in which Council Fundraising events this **Scout** participated and his gross sales amount:

Popcorn Sale \$ \_\_\_\_\_  Niagara Candy Sale \$ \_\_\_\_\_

Does your Pack/Troop/Crew conduct a fundraiser (s) with funds earmarked for summer camp?

Candy Sale  Other (please specify) \_\_\_\_\_ Amount Raised for camp: \$ \_\_\_\_\_

Our household income is:  Under \$20,000  \$20,000 - \$40,000  \$40,000 - \$60,000  
 \$60,000 - \$80,000  \$80,000 + Number of Dependents \_\_\_\_\_

Number of children attending **Iroquois Trail Council** camps this summer:

Day Camp \_\_\_\_ Cub Scout Resident Camp Sam Wood \_\_\_\_ Boy Scout Resident Camp Dittmer \_\_\_\_

National Youth Leader Training at Dittmer \_\_\_\_

Please describe briefly, but specifically, why a campership is needed:

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

**DEADLINE: April 8, 2011**

**ALL SECTIONS MUST BE COMPLETED AND SIGNED.  
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

The Iroquois Trail Council believes that each Scout should contribute toward his/her camp fee. This policy also allows the council to utilize the limited funds for more individuals. Unit leaders (Cubmaster, Scoutmaster, and Advisors) will receive notification of Campership(s) granted on or about April 29, 2011.

**(CHECK ONE ONLY – YOU MUST USE SEPARATE FORM FOR EACH CAMP)**

Campership to be applied to:

- |                                                                            |                                                                                                |
|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Boy Scout Resident Camp<br>at <b>Camp Dittmer</b> | <input type="checkbox"/> Cub Scout Resident Camp<br>at <b>Camp Sam Wood</b>                    |
| <input type="checkbox"/> National Youth Leader Training at Dittmer         | <input type="checkbox"/> Cub Scout Day Camp<br>(any of the 3 Iroquois Trail Council Day Camps) |

**Please refer to camp fees as detailed in each *Camp Leader's Guide*. They are available from your Pack/Troop Leader and also online at [www.itcbsa.org](http://www.itcbsa.org)**

**(A) CAMP FEE:** \_\_\_\_\_

- |                                             |       |
|---------------------------------------------|-------|
| Contribution from Scout & Family            | _____ |
| Commission from Council Niagara Candy Sale  | _____ |
| Amount for Camp from other unit fundraisers | _____ |
| Contribution from Pack/Troop/Crew           | _____ |
| Contribution from Chartered Organization    | _____ |
| Contributions (Other _____)                 | _____ |

**(B) Total Contributions** \_\_\_\_\_

**Except in unusual circumstances requests should not exceed 50% of Camp Fee**  
**Amount requested from campership fund:(Fee (A) minus (B) contributions) =** \_\_\_\_\_

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_  
 (Required)

Unit Leader Validation (Required)

- Does your unit arrange and encourage fundraising opportunities for the Scout to earn his way to camp?  Yes  No  
 No If not, why? \_\_\_\_\_ Does this applicant participate?  Yes  No  
 Has your unit provided financial assistance to this Scout?  Yes  No If yes, please be sure to note this amount in the contributions section.  
 Do you support this campership application?  Yes  No Comment? \_\_\_\_\_

Signature of Unit Leader \_\_\_\_\_ Date \_\_\_\_\_  
 (Required)

*Please return to: Campership Committee, Iroquois Trail Council, BSA, 45 Liberty Street, Suite #2, Batavia, NY 14020*

<b>Office Use Only</b>		
_____ Not Approved	_____ Hold	_____ Application Received
_____ Approved	_____ Amount	_____ Response sent
<b>DEADLINE: April 8, 2011</b>		