

Long Term Campership Application

For Okefenokee Area Council attendance to Camp Tolochee

All applications are considered based entirely on financial need and availability of funds. Money is made available by private donors. Submit application to: **Okefenokee Area Council Boy Scout of America Attn: Camperships 302 Screven Ave. Waycross, Ga. 31501**

Complete the following application, including all signatures, and mail it to the address given above. Certification of the Scoutmaster or Committee Chairman is required. Camperships are rarely given for more than half of the camp fee since the Scout should earn part of the cost of attending camp. The Scout must be a registered Boy Scout in Okefenokee Area Council.

Applications must be received no later than May 1, 2009 and will be reviewed in the order in which they were received. The Okefenokee Area Council Camping Committee will review the applications and decide which Camperships will be awarded. For all approved Camperships, notification will be sent to the unit leader listed below. If a Campership is awarded, it may be used only for the Scout to whom it is given during the week listed below. **As part of the application, parents MUST describe the circumstances which justify the Campership.**

Please list the financial reasons which caused you to submit this application. The information will remain confidential.

This application will not be considered without the justification. I hereby apply for a Campership for:

Name:	Troop:		
Address:	District:		
City,	State, Ga.	Zip:	Home Phone:
Email:	Amount Requested:		
Did the troop provide a means to earn the fees? <input type="checkbox"/> Yes <input type="checkbox"/> No			Dates of Camp:
Did your son participate in the fund-raising? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason Campership is needed (REQUIRED):			

(continue reason on back of form or separate page, if needed)

Parent's Signature:	Date:
If the Scout is granted a Campership, our troop will be responsible for helping him to obtain a physical exam,	
transportation and equipment needs.	
Scoutmaster or Committee Chairman Signature:	
Position: Phone #:	
Email:	