

CONFIDENTIAL CAMPERSHIP REQUEST

A limited number of camperships are available to send Scouts to Greater Tampa Bay Area Council Cub Scout Day Camps and Boy Scout Summer Camp. These camperships are designed to make camp possible to deserving Scouts who otherwise would not be able to meet the fee requirements. It is important that the details be handled in such a way to cause no embarrassment to the boy or his family. **Camperships are normally defined as partial payment (up to 1/2) of the registration fee. It is the responsibility of the boy, his family or the unit to provide the balance of registration fees and/or any additional program fees.** Additional need beyond 1/2 of the registration fee will be considered on an individual basis.

Date Received _____
Date Approved _____
Amount Approved _____

In order to qualify for a campership, the applicant must be an active, registered member of a unit in the Greater Tampa Bay Area Council, and the unit leader must certify that a campership is needed to enable the applicant to attend camp. If awarded, the campership will be only for the Scout named below; in other words, **camperships are not transferable**. Finally, camperships are awarded on a first come, first serve basis until funds are depleted.

Applicant Name _____ Unit _____ District _____

Address _____ City _____

Phone Number _____ Zip Code _____

- | | |
|--|----------|
| 1) Cost of Day Camp/Summer Camp: | \$ _____ |
| 2) Amount boy and his family can pay | \$ _____ |
| 3) Amount institution or unit treasury will pay: | \$ _____ |
| 4) Amount requested from Campership fund: | \$ _____ |

Please state on the reverse side of this application the special financial need(s), which make it a hardship for the entire fee to be paid by the applicant.

We have indicated above the maximum support available from the boy, family, institution, and our own funds, and we recommend approval of this request, if campership funds are available.

Print Leader Name _____ Signature _____

Address _____ City _____

State & Zip _____ Phone # _____

Print Parent's Name _____ Signature _____

Address _____ City _____

State & Zip _____ Phone # _____

District Executive Signature _____ Date _____

CAMPERSHIP APPROVAL

Scout/Cub _____ of Troop/Pack _____ has been approved for a campership in the amount of \$ _____. Bring this approval to camp with you and it will serve as a \$ _____ credit when you register at camp. **IT IS VALID ONLY IF USED BY THE ABOVE NAMED SCOUT.**

Approved by _____ Date _____

Mail completed form to: Greater Tampa Bay Area Council, BSA, Attn: Camperships, 11046 Johnson Blvd, Seminole, FL 33772