

CAMPERSHIP APPLICATION

The Longhouse Council Campership Fund was established to assist Scouts who, without financial assistance, would not be able to attend camp. We sincerely believe that all Scouts need an outdoor experience to grow in the Scouting program. The funds used for the Camperships are raised through various sources, including the SCOUTPOWER Coin sales made possible through the generous donations of Toshiba Business Solutions. For this reason, we ask that only those with true needs apply for a Campership.

There are several points to keep in mind as you complete the application:

- Camperships are only available for “in Council” camps.
- NO deposit is required, and NO money should be sent with this completed application.
- The amount requested does not guarantee the campership amount.
- Camperships cover only one week of camp per season and applicant.
- The Scout and his family must complete the first section.
- ALL the questions must be answered. **Incomplete applications will be returned.**
- All applications are considered based on the information supplied.
- The application MUST be submitted to the address below BEFORE April 30th to be considered. **Applications received after this date will be considered only if funds become available.**

If you have further questions concerning the Longhouse Council Campership program, please direct them to Ron Hill at 315-463-0201 ext.115 or Ronald.hill@scouting.org.

Yours in Scouting,

Vice President of Camping

Submit the completed application for consideration to:
Scouting America Longhouse
Council Campership Fund
2803 Brewerton Road
Syracuse, NY 13211

CONFIDENTIAL CAMBERSHIP APPLICATION

Please print clearly.

This section is to be completed by the SCOUT and their FAMILY:

Scout's Name: _____ Age: _____

Address: _____

City, State: _____ Zip: _____

Pack/Troop/Crew #: _____ District: _____

Please check the REASON:

- Sabattis Scout Reservation
- Scouts BSA Day Camp
- Cub Scout Camp
- Training

Dates attending camp: _____

If I receive a Campership, I will participate fully in the camping program, remain active and support my unit, and live up to the ideals of Scouting.

Signed by Scout: _____ Date: _____

To be completed by PARENT or GUARDIAN:

Family Size: Adults _____ Children _____

Please tell us why a Campership is needed. (attach a separate sheet if necessary) _____

Total camp fee:..... \$ _____

Unit/Other contribution:..... \$ _____

Amount of Campership Request..... \$ _____

Signed by Parent/Guardian: _____ Date: _____

To be completed by UNIT LEADER or COMMITTEE CHAIR:

Our Unit sells popcorn: (yes/no): ____

Our Unit participates in Friends of Scouting: ____

Our Unit provides Community Service: Approximate hours ____

Signed for Unit: _____ Date: _____

Unit Position: _____ Phone: _____