Campership Application
Policies and Procedures

- Camperships are available from the Ventura County Council for **any Ventura County Council Scout** to attend one of the camps or programs listed on the back of this form.

- **Only one Campership** fund request will be granted per applicant per year to allow us to serve as many people as possible. The maximum amount of aid per camp or program is listed on the other side of this form.

- **Each person requesting financial aid must fill out a separate form.**

- A reservation for a camp or program must be made ***before*** this request for financial aid will be processed. Your unit leader can give you the reservation number needed for this form.

- **Incomplete applications will be returned without processing.**

- Camperships once awarded are not transferable to another applicant. If an applicant approved for funds does not attend the activity for which the funds were requested, the Campership is forfeited and only the initial fee will be charged to the unit. Each recipient may be asked to complete a postcard thanking Campership fund donors. This will occur at the camp or activity.

- Turn in the application early to ensure consideration. Applications may be submitted beginning on January 31st for the summer to follow. Limited Camperships are available each year and granted on a first-come, first served basis.

- All **completed and signed requests** for Camperships must be submitted on this form. The **deadline for submittal is April 30, 2014**. Requests turned in after April 30, 2014 will only be considered if additional funding becomes available but must be in the council office **no later than** four weeks prior to the start of the camp or activity. Forms may be faxed or mailed to the council office (information below). It is the responsibility of the applicant to ensure that the form arrives in the council office on or before the deadline.

- The family of the applicant will receive written notification of any decision by mail prior to camp. ***NOTE: All Campership funding decisions made are final.***

- Fill in all the boxes that are not shaded on the other side of this form, sign and return as soon as possible.

Ventura County Council, BSA
509 East Daily Drive, Camarillo, CA 93010
T: 805-482-8938 F: 805-484-9172 W: www.vccbsa.org

Campership Application

Use a Separate Form for Each Person Requesting Financial Assistance
ALL INFORMATION IS KEPT CONFIDENTIAL & IS SUBJECT TO VERIFICATION

Circle the type of unit the applicant is a registered member of Pack Troop Team Crew Post Ship	**Unit Number** *(not den or patrol)*	**District** *(not council)*	**Reservation Number OR Week @ Camp reserved**
Name of person attending camp: **(one person per form)**		Date of Birth: Month / Day / Year	Email Address:
Mailing Address:			County:
City:	State:	Zip:	Home Phone Number: ( )

List names and ages of other children in the home
(only children under 18 years of age):

How many people live in the household? _____	List the total gross monthly family income before taxes: $_____**per month**

Additional information that may affect the award (Be specific and attach additional sheets if needed): _____
_____
_____
_____

Did your family participate in the Friends of Scouting Campaign? Yes No

Did this youth participate in the council popcorn sale? Yes No

Circle the name of the camp or program attending (only one camp or program may be circled):

Cub Scout Day Camp	**Webelos Resident Camp**	**Boy Scout Summer Camp**	**Philmont Scout Ranch**	**Jamboree**
Camarillo Conejo Valley Matilija Ronald Reagan	Camp Three Falls	Camp Three Falls	***Council Contingent Only**	***Council Contingent Only** NA

Use this chart to determine the maximum amount you may request.

Camp / Activity	**Maximum Award**	**Camp / Activity**	**Maximum Award**	**Camp / Activity**	**Maximum Award**
Boy Scout Summer Camp	Up to 50% of Camp Fee	Webelos Resident Camp	Up to 50% of Camp Fee	*Philmont	Up to 25% of Fee
		Cub Scout Day Camp	Up to 50% of Camp Fee	*Jamboree	Up to 25% of Fee

Using shaded chart above, list amount of aid you are requesting:

Amount of Aid Requested $_____

_____
Signature of Parent / Guardian

Campership Chairman Approval AMOUNT $_____

_____ Date_____
Signature

(_____)_____
Daytime Phone #

_____
Date