



Monmouth Council Campership Application

(forms MUST be completely filled in to be considered) Please Print Date of Birth: Name of Scout: Address: ______ City: _____ Telephone: _____ ZIP Code: (circle one) Pack/Troop/Crew/Post#_____ Rank: Campership Request (Check One): () Boy Scout Basic Program () Cub Scout Basic Day Camp () Boy Scout Outback Program () Cub Scout ½ Week Resident Camp () Cub Scout Full Week Resident Camp () Boy Scout Day Camp Financial Need: Children in college: _____ No. of children in household: _____ Father's Occupation _____ Mother's Occupation Total Annual Household Income Amount of Trail's End Popcorn sold by Applicant: Amount of Council Camp Cards sold by Applicant: \$_____ Explain reason for assistance (please be specific): Campership Request: (Use full price of program without discounts when calculating) Share of camp cost from family:
Share of camp cost from unit:
Amount requested for campership: **Note:** Camperships are not approved for the entire camp fee. I understand that this is a request for financial assistance to attend camp and that camperships will be awarded on the basis of genuine need and availability of funds. All information will be kept confidential. Camperships requests are only accepted for one week of program per Scout and will not cover any additional fees. (busing, BBQ, pre-orders, etc.) Parent Signature: Unit Leader's Approval: Date: _____ (*Note*: Unit Leaders MUST screen campership requests before submitting them.) Please forward application to: Monmouth Council Campership Fund 705 Ginesi Drive Morganville, NJ 07751 Campership applications must be received by April 1, 2020 to be considered.

Date Received: _____ Amount Approved: _____ Date: ____

Campership # _____