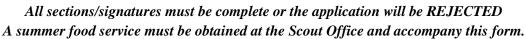


## 2024 Application for Campership Assistance

Please use separate form for each applicant





Youth Name:			
Address:	City:	Zip:	
Youth E-mail Address (if appli	cable):		
Scout Parent/Guardian Email:	Phone # _	Phone #	
Unit Type & Number:	Chartered Organization:		
Camp Lavigne			
Date attending camp:			
	ut will personally provide from any fundraisers.	\$	
2. Amount that the pare		\$	
	t and/or Chartered Organization will provide	\$	
	e Registration Fee (See Reverse Side)	\$	
	ney provided for Scout Add lines 1 through 3	\$	
	hip Assistance requested Subtract line 6 from line 5	\$	
_	pership assistance generally will not exceed one half o	f the camp fee	
Parent/Guardian statement explai	ning detailed need for assistance:		
Family's annual income \$	Number of children in household:		
*	ype of public assistance? Yes / No		
	rial proof (Case Number) on the Summer Food Service	e Form (Only one Summer Food	
_	ily – form is available at the Scout Office)	or office the statement root	
	uesting a campership must fill out the summer food	service form.	
Parent/Guardian Signature:		Date:	
	022 Friends of Scouting (FOS) Campaign? Yes / No		
Scoutmaster Signature		Date <sup>.</sup>	
AND		Dutc.	
	r Committee Chair Signature:		
6 F. <u></u>	Application Deadline is March 15, 2024.		
Return to: Columb	ia-Montour Council BSA * 5 Audubon Court * Bloo	omsburg, PA 17815	
	hone: (570) 784-2700 * www.columbiamontourbsa.	0.	

All information on this form will be kept confidential and used only by the committee determining the Camperships.

Camp the Scout Will Attend (Circle O	<u>Fee</u>	
Cub Scout Day Camp – June 30 to Jul	\$245.00	
Cub Scout Resident Camp – June 30 t	\$295.00	
1st Week Traditional Boy Scout Camp	\$515.00	
$2^{nd}$ Week Traditional Boy Scout Camp – July $14-20$ , $2024$		\$515.00
Wilderness Living – July 14 – 20, 2024	1	\$525.00
	Community contributions and other ount of funds available. By maximi	•
Camperships are granted for one cam **Note: Camperships are applied to t		l rate.
All signatures obtained and quesSummer Food Service Form fille	stions are answered on this form ed out signed with TANF # OR family	v income attached
Needed for Camp Registration:		
(For Scouts attending Cub camps whe	ere a shirt is provided with registrat	ion).
T-Shirt Size Youth: SM Adult: SM SPECIAL NEEDS (including dietary)		_XL _XL
	— · · · · · · · · · · · · · · · · · · ·	t we need the information listed to e not filled out completely your
Cost of Comp	¢	Invoice #:
Cost of Camp Campership Amount Gra	\$ anted \$	
Balance Due Prior to Ca	mp \$	
Date and Invoice # of Final Pay	yment	- !
Member of Camping Committee  Date:	Signature:	
l 		

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