BOY SCOUT CAMPERSHIP PROGRAM

PURPOSE: The Campership Program identifies and assists financially those Boy Scouts who would like to attend a Glacier's Edge Council Boy Scout long term summer camp, or specialty session; but who, due to financial constraints or hardship, are unable to bear the cost associated with those camps.

The funds allocated by the Campership Committee are intended to supplement funds raised by the youth and the youth's troop who must bear at least a portion of the cost. Although the primary qualification will be financial need, priority will be given to those Troops that are active in popcorn sales and Friends of Scouting.

PROCEDURE: Complete the application and submit it to the Scout Service Center by March 30th. The Scout will be notified of the decision by the Campership Committee by April 15th. The awarding of a Campership will be at the discretion of the Campership Committee. There are two portions of the application form to be completed: one by the Scout and one by the parent/guardian. Both portions must be completed and returned to the Campership Committee.

CAMPERSHIP POLICIES

1. The priority date for **completed** Campership Applications is March 30th. Applications received after that date will be considered based on availability of funds.
2. In general, because of limited funds, the council will provide up to one-third of the camp fee.
3. Troops receiving direct support from the United Way will be considered last, based on the belief that this support is a community's way of sending your youth to camp in lieu of supporting the council program.
4. Troops participating in Friends of Scouting and popcorn sales will be considered first.
5. We recognize that some youth will join after the spring product sales and may not have the opportunity to earn camp fees. This will be taken into consideration.
6. Campership decisions will be made in March. The Campership is provided to the Troop, not to an individual member, and will be deducted from the Troop's total fees owed. The Campership is for a specific youth member. If that member does not attend camp, the Campership will be rescinded. Campership decisions will be sent to the Scout and unit leader by April 15th.
7. Youth are to submit a "Thank You" note and/or photo when being awarded camperships.
8. This is due when you leave camp and can be turned into the Camp Director. Scouts who do not submit a thank you note or photo will not be eligible for camperships the next year.

This portion of the application must be fully completed by the parent/guardian.

Camper's Name: _____ Troop: _____
Name of parent/guardian:_____
Address: _____City: _____ State: _____ Zip: _____

How will attending camp benefit your son? Please attach an additional sheet

Application for Campership

Return to the Madison Service Center by **March 30**

Attn: Camperships

Glacier's Edge Council – 5846 Manufacturer's Dr Madison, WI 53704

This portion must be fully completed by the parent/guardian & signed by the Unit Leader.

Name of Youth Member: _____

Troop: _____   Chartered Organization: _____

Name of Unit Leader: _____   Email: _____

Address of Unit Leader: _____

City: _____ State: _____ Zip: _____ Phone: (_____)_____-_____

Boy Scout Summer Camp Session #:   1   2   3   4   5   6

Specialty Camp: _____

Has youth had a Campership in prior years?   Yes   No   If yes indicated amount: _____

How much will the Troop contribute: $_____

How much will the chartered organization contribute: $_____

How much popcorn did the youth sell this past year? $_____

How much in camp cards did the youth sell this year? $_____

Did the unit participate in Friends of Scouting?   Yes   No

How much is being requested in Campership?

_____   _____
Signature of Parent/Guardian   Signature of Unit Leader

Unit Leader Statement (the more information you give us concerning the youth, the better we can evaluate their need). Please use the space provide below or attach additional sheets if necessary.

_____
_____
_____

How many adults in the family are employed?   _____

Number in family: _____

Number going to camp: _____

Annual Household income: _____

Note: Camperships are awarded based on need and cannot be transferred to another member.

Committee Use Only Approved: _____   Rejected: _____   Amount: _____ Date: _____

Leader Notified? _____   Date Letter Sent: _____ Initial: _____