

CAMPERSHIP APPLICATION

INSTRUCTIONS TO PARENT/GUARDIAN TO APPLY FOR CAMPERSHIPS:

This fund provides camperships for Scouts from the Silicon Valley Monterey Bay Council attending a Silicon Valley Monterey Bay Council resident, day, or summer camp program. The primary source of campership funds come from private individuals. These campership donors give out of a desire for every Scout to have an exciting, quality camp experience. Those wishing to make contributions should please contact the Council Service Center at (408) 638-8300

NOTE: Campership applications are NOT registration forms for camp, they are applications for financial aid. Please give the appropriate camp application with the required deposit to the Council Service Center.

1. Due to the large number of campership requests, only youth who are registered in the Silicon Valley Monterey Bay Council and are attending a Silicon Valley Monterey Bay Council camp will be considered. **Only one week of camp per Scout will be granted.**
2. May 15th is the deadline for all summertime programs. However, because of the processing involved and because the campership fund committee must approve all requests individually, it is requested that you send in this form as soon as possible. Two to three months in advance is not too soon.
3. **USE ONLY ONE FORM PER SCOUT.** More campership forms may be obtained from the Council Website: <http://www.svmc.org>, or at the Council Service Center located at 970 West Julian Street in San Jose, or by calling (408) 638-8300, or by photocopy this application form.
4. **Answer every question on the form and please make sure the form is signed.**
5. For Cub Scouts attending a camp, please complete the correct camp application along with half of the total cost due. Please do not pay any further fees until you receive notification.
6. **WHAT DO I DO WITH THIS FORM?** This confidential information does not need to be shared with your unit leadership. This application should be mailed directly to the address below. Advise your unit leader that you have submitted a campership application.
7. Notification of how much the family must pay will be sent to both you and your unit leader. A total campership is not given. The campership is granted up to cover a portion of the cost of the camp fees, typically not to exceed 50 percent. The Scout/parent will be asked to make up the difference. Your pack, troop or crew can sometimes help out. Ask your unit leader how your Scout can sell popcorn or Scout-O-Rama tickets and pay his/her way to camp. The form will tell you how to submit the balance due.
8. You must include the camp location, name, and date the Scout is attending camp. If you do not know, ask your unit leader.
9. As with any program of this type, the donors providing the funds are always pleased when they receive a thank you letter from the Scouts who have benefited from these funds. Your confirmation letter will provide the Scout with further information on how to thank our campership donors.
10. **Campership applications should be addressed to the SVMBC office at the address below.**

Campership Fund
Attn: Camping Director
Silicon Valley Monterey Bay Council, BSA
970 W Julian Street
San Jose, CA 95126
(408) 638-8300
camping@svmbc.org

CAMBERSHIP APPLICATION

**INCOMPLETE APPLICATIONS WILL BE RETURNED!
PLEASE READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING.**

Check One: Pack Troop Crew Unit # _____ District _____

Camper's Name (Last) _____ (First) _____

Address: _____ City _____ Zip _____

Home Phone: _____ Other Phone: _____

Scout's Age at Time of Camp: _____ Birth Date: ____/____/____ Is Scout a foster child? Yes No

Father/Guardian's Name: _____ Occupation: _____

Email : _____ Cell/Work Phone: _____

Mother/Guardian's Name: _____ Occupation: _____

Email : _____ Cell Work Phone: _____

CAMP ATTENDING:

____ Cub Day/Twilight Camp ____ Cub Scout Resident ____ Webelos Resident

____ Scout Resident Camp @ Hi-Sierra

____ NYLT ____ Week long youth training course

Date(s) your Scout will be attending camp: _____ Cost of camp \$ _____

Amount of campership requested \$ ____ Number of other siblings attending a camp this summer: ____

MONTHLY FAMILY INCOME

Gross Monthly Income: \$ _____ (salary, wages, commission, etc.)

All Other Assistance: \$ _____ (alimony, welfare, AFDC, support, etc.)

Number of persons in household dependent on income: _____

On a separate piece of paper please answer the following questions to help us evaluate your request.

1. Why do you want your Scout to attend camp?
2. How will the Scout be earning his/her portion of the camp fee?
3. Please have your Scout tell us in his/her own words why he/she wants to attend camp this summer.

FOR PARENT OR GUARDIAN:

In consideration of this campership application for sponsorship, I agree to the following conditions: (1) to allow my child to attend camp; and (2) to contribute the amount of money specified for my child to attend camp.

Parent/Guardian's Signature: _____ Date: _____

******NOTE: ALL information contained in this application is considered confidential******

SVMBC BSA: Date Received: _____ Approved Campership \$ _____

Denied—Reason: _____

Approved by: _____ Date: _____

Date Letter Sent: _____