

Full Name _____ **Date of birth** _____

Address _____ **City** _____ **Zip** _____

Troop/Pack No. _____ **District** _____ **School** _____

Parent's Name _____ *Emergency* Phone No. _____

Camperships are ***ONLY*** for registered Scouts and will be allotted under the direction of the District Director/Executive and the Field Director, to families who need the help. A Scout can attend only one week of camp during the summer.

1. Pay reservation fees (non-refundable). Reservation fee must accompany the Campership or have been paid to the unit or the reservation desk before campership will be approved.
2. The Scout must be registered in the unit through which he is applying for the campership.
3. Obtain a medical examination by a physician before the Scout attends camp and have the BSA medical form filled out, including shot record, and signed.
4. Provide spending money.
5. Provide personal equipment. (See Scoutmaster/Cubmaster for list of supplies needed.)
6. ***Pay \$ _____ toward the total camp fee of \$265 (Boy Scouts) or \$155 (Webelos) if paid in full by May 13, 2016. The total fee increases to \$285 (Boy Scouts) or \$175 (Webelos) if paid after May 13, 2016. No more than 50% will be provided for a campership.***

1. Provide tents and health service at camp.
2. Camp provides 3 meals each day in the dining hall.
3. Camp provides opportunities for swimming, Scout activities, shooting sports, hiking, and campfires.
4. Provide a campership in the amount of \$ _____.

Date _____ Signature _____ (Parent or guardian)

Signature _____ (Scoutmaster/Cubmaster)

Signature _____ (District Executive)

Signature _____ (Field Director)

CAMP RESERVATION INFORMATION (You MUST check camp and circle week/session you are attending.)

BOY SCOUT CAMP							WEBELOS CAMP								
Trevor Rees-Jones				Constantin			James Ray								
(circle one)							(circle one)								
Week:	1	2	3	4	5	6	Session:	1	2	3	4	5	6	7	8
Starts:	6/12	6/19	6/26	7/3	7/10	7/17	Starts:	6/12	6/15	6/19	6/22	6/26	6/29	7/3	7/6