CAMPERSHIP APPLICATION **SUMMER CAMP**

(Completed forms are due by April 1st)

A campership fund has been established to ensure youth from the Atlanta Area Council have the opportunity to participate in Summer Camp. Camperships are awarded based on individual financial need. After the campership committee makes determinations, unit leaders will be notified. Please bring a copy of that confirmation to camp.

Scouts receiving a campership are encouraged and expected to write and return a thank you note prior to the end of camp.

Scout's Name:	Unit Type and Number:	
Age: Rank in Scouting:	District:	
Family Size: Please indicate the number of income tax dependents currently residing in your home:		
Total annual household income: \$	_	
Scout has participated in the following fund-raising opportuniting Popcorn Sales Camp Cards	es: (<i>Check all that apply</i>) Unit Fundraiser	
If Resident Camp: Amount of Campership requested: \$ (enter dollar	r amount up to ½ of total camp fee)	
Our unit is <u>registered</u> for the week of: at:	Woodruff Bert Adams	
Activity: Scouts BSA Cub Sc	cout Venturing	
If Day Camp:		
Day Camp Campership provides a \$50 credit		
My Cub Scout will be attending the	District Day Camp	
Parent/Guardian, please indicate the reason or need for this Campership in the space provided:		

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Parent/Guardian Name:	Signature:
registered with this unit and has made an	ecuring the needed camp fee have been exhausted and that this Scout is effort to earn and save toward his camp fee within the framework of his. Please include a copy of your unit roster to verify registration.
Unit Leader Name:	Signature:
Email:	Unit Position:
•	Please submit completed forms to: Veronica Bramlett vbramlett@atlantabsa.org or 1800 Circle 75 Pkwy Atlanta, GA 30339 770-956-5980
CAMPERSH	IP COMMITTEE APPROVAL Campership in the amount of: \$
Approved:	Date