

INSTRUCTIONS FOR COMPLETING
THE BUCKEYE COUNCIL
CAMPERSHIP APPLICATION

1. Be sure to complete the application in its entirety.
2. Be sure to correctly indicate for which event the application is being submitted.
Only **one** (1) campership will be awarded to an individual Scout during each calendar year.
3. A reason for the application **MUST** be given.
4. Application items #2 through #6 must equal the “Total Camp Fee Required” (item #1).
5. The application **MUST** be signed by the parent or legal guardian, youth member, unit leader, and unit committee chair.
6. The application **MUST** be submitted to the Buckeye Council, BSA by March 1, each year. Late applications will receive consideration based on date received and available funds.
7. All information will be kept confidential, but is required for general reporting purposes.

Consideration for Campership funds will be given on the basis of financial need, participation in fundraising opportunities, contribution from the unit and/or chartered organization and the family’s ability to pay the established camp fees. Consideration for Camperships will not be given on the basis of age, race or religion. It is the position of the Buckeye Council that all registered Scouts be awarded the opportunity to attend a Buckeye Council summer camp program, BSA High Adventure program, or BSA supported national activity.

Buckeye Council Main Administrative Office

2301-13th Street, NW
Canton, OH 44708

Mansfield Service Center and Scout Store

3 North Main Street, Suite 303
Mansfield, OH 44902

Marion Service Center and Scout Store

1310 Mt. Vernon Road
Marion, OH 43302

BUCKEYE COUNCIL CAMPERSHIP APPLICATION

Name _____ District: _____

Address: _____ Telephone: _____

_____ Email: _____

City: _____ State: _____ Zip Code: _____

- Cub Scout Day Camp
- Webelos Resident Camp
- Boy Scout Summer Camp
- National Youth Leader Training Conference
- Council Contingent (Event _____)

Event Date: _____

Camp Session #: _____

Statement of Need: _____

***No application will be considered without statement of need!**

1. **Total Event Fee.** \$ _____
2. **Amount Earned Toward Event From Popcorn Sales.** (_____)
(Please include popcorn camp certificate)
3. **Amount Earned Toward Event From Other Fundraisers.** (_____)
4. **Amount the Unit or Chartered Organization will Contribute.** (_____)
(Some amount is expected)
5. **Amount the Family is Able to Contribute.** (_____)
(Some amount is expected)
6. **Campership Amount Requested.** \$ _____

Signature of Parent or Legal Guardian

_____/_____/20_____
Date of Application

Signature of Youth Applicant

Signature of Unit Leader

Signature of Unit Committee Chair.

This Section for Council Use Only

Date Received: ____/____/____

Amount Approved: \$ _____

Date Approved: ____/____/____

Approved By: _____

Due by March 1, Annually