

**2020 "CAMPSHIP" FINANCIAL AID APPLICATION**

Please read the information page before completing this application in its entirety – incomplete applications will not be considered. Please submit one application per family. Applications must be received by April 1<sup>st</sup>, 2020.

**AID IS ONLY AVAILABLE FOR A CRADLE OF LIBERTY COUNCIL SCOUT ATTENDING A CRADLE OF LIBERTY COUNCIL CAMP**

Parent/Guardian Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Household Information: One Parent / Two Parent                      One Income / Two Income

Total Number (not including parents) of dependents claimed on 2018 Tax form (1040): \_\_\_\_\_

Total Family Earned ANNUAL Income: \$ \_\_\_\_\_ Public assistance ANNUAL income \$ \_\_\_\_\_

List types of assistance received: (free meals, etc): \_\_\_\_\_

Number of Scouts in the family attending a Cradle of Liberty Council Camp: \_\_\_\_\_

Number of Scouts in the family attending another council's camp or a national high adventure base: \_\_\_\_\_

**Please list all of the Scouts in your family who you are requesting aid for:**

1. Scout's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_

District: \_\_\_\_\_ Unit Type and Number: \_\_\_\_\_ Camp Attending: \_\_\_\_\_

Camp Dates: \_\_\_\_\_ Cost of Camp (do not include any unit costs): \$ \_\_\_\_\_

Unit Leader's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Did the scout participate in Popcorn or Adventure Card Sales? Yes / No Which sale? \_\_\_\_\_

Did the unit offer any fundraising opportunities to help with the cost of summer camp? Yes / No

Did the scout participate in a Unit fundraiser? Yes / No. If no, why not?

2. Scout's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_

District: \_\_\_\_\_ Unit Type and Number: \_\_\_\_\_ Camp Attending: \_\_\_\_\_

Camp Dates: \_\_\_\_\_ Cost of Camp (do not include any unit costs): \$ \_\_\_\_\_

Unit Leader's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Did the scout participate in Popcorn or Adventure Card Sales? Yes / No Which sale? \_\_\_\_\_

Did the unit offer any fundraising opportunities to help with the cost of summer camp? Yes / No

Did the scout participate in a Unit fundraiser? Yes / No. If no, why not?

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3. Scout's Full Name: \_\_\_\_\_ Age: \_\_\_\_\_

District: \_\_\_\_\_ Unit Type and Number: \_\_\_\_\_ Camp Attending: \_\_\_\_\_

Camp Dates: \_\_\_\_\_ Cost of Camp (do not include any unit costs): \$ \_\_\_\_\_

Unit Leader's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Did the scout participate in Popcorn or Adventure Card Sales? Yes / No Which sale? \_\_\_\_\_

Did the unit offer any fundraising opportunities to help with the cost of summer camp? Yes / No

Did the scout participate in a Unit fundraiser? Yes / No. If no, why not?

Please complete the section below relating to the costs of attending a Cradle of Liberty Council camp. Please note all sections must be completed for the application to be considered. If you have more than 3 scouts attending camps please complete another application and ensure they are turned in together.

Scout 1 cost of camp	\$
Scout 2 cost of camp	\$
Scout 3 cost of camp	\$
<b>TOTAL COST OF CAMP</b>	<b>\$</b>
Scout 1 amount earned through fundraising	\$
Scout 2 amount earned through fundraising	\$
Scout 3 amount earned through fundraising	\$
<b>TOTAL EARNED THROUGH FUNDRAISING</b>	<b>\$</b>
Scout 1 Family Contribution	\$
Scout 2 Family Contribution	\$
Scout 3 Family Contribution	\$
<b>TOTAL EXPECTED FAMILY CONTRIBUTION</b>	<b>\$</b>
<b>TOTAL FUNDS RAISED (scout plus family contribution)</b>	<b>\$</b>
<b>AMOUNT OF AID REQUESTED (cost of camp minus total funds raised)</b>	<b>\$</b>

Parent/Guardian statement of financial need – the more detail you provide the better the committee is able to make a true determination of need (please continue on a separate sheet if necessary). All provided information is confidential:

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify, to the best of my knowledge, that the information on this form is accurate.

Unit Leader Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2020 "CAMBERSHIP" FINANCIAL AID APPLICATION****INFORMATION PAGE**

**PLEASE READ CAREFULLY BEFORE COMPLETING THE FINANCIAL AID APPLICATION**

**PURPOSE:** The goal of the Campership program is to help provide supplemental funding for a registered Scout of the Cradle of Liberty Council attending a Cradle of Liberty Council summer camp, whose parents/guardians and unit leader certify is unable to pay for the cost of camp. **Funding is limited, and we ask only those with true needs apply for aid – our assessment criteria is similar to the Federal Income Eligibility Guidelines.** Youth members are expected to earn their own way in Scouting and each unit should provide an opportunity for Scouts to participate in fundraising activities to help offset these costs.

**RESTRICTIONS:** All awards are made on the basis of need. Availability of financial aid awards is dependent on the funds available in a given year. Financial Aid is limited to no more than 50% of the "early bird" camp fee. It is required that the scout and his/her family make some contribution to the camping opportunity to make-up the other 50%. **All parts of the application must be completed to be considered for aid.** Applications are considered on the basis of the information supplied. **Please ensure you provide a detailed explanation of need** – writing "financial hardship" is not a sufficient reason when considering the many Scouts who need extra support, so please be specific. Please note that completion of this application DOES NOT guarantee financial assistance will be given, and receipt of 50% of the fee is NOT to be expected.

**IMPORTANT DATES:**

**ALL applications MUST be received by April 1st.** No money needs to be submitted with the application.

Applications received after this date will only be considered if funds become available.

Letters to both parents and unit leaders will be mailed out by April 25. Acceptance of the award and the camp deposit (\$50 for Resica Falls and \$30 for Cub Camp) must be received at the council office by May 15. All camp fees (less the amount awarded) must be paid in full before the campership is applied directly to the Scout's camp fee. Unit leaders will be able to see this in the online registration system. **Unit leaders should ensure that the Scout is added to their camp roster in the online registration system in order that the financial aid can be applied.**

If the request is denied, or the amount of the grant is less than requested the applicant will have until the unit's camp date to pay the balance of fees without penalty. **Please note if paying at camp then the letter stating the amount of financial aid granted must be taken to camp so that the award can be applied to the Scout's account/unit account correctly.**

**ATTENTION CUBMASTERS AND ARROW OF LIGHT LEADERS:**

Current 5th graders who are crossing over to Scouts BSA units should be advised to make arrangements to attend summer camp with the troop they intend to join. Being new to a troop is not a valid reason to apply for financial aid, and the troop may be going to an out of council camp, which would not qualify them for financial assistance from Cradle of Liberty Council.

**QUESTIONS:** Contact the Camping Department at [camping@colbsa.org](mailto:camping@colbsa.org) or (610) 688-6900. It is highly recommended that all applications from a unit be submitted together.

**Submit completed applications to:  
Cradle of Liberty Council, BSA Financial Aid Fund  
1485 Valley Forge Rd Wayne, PA 19087**