

2024 CAMPERSHIP APPLICATION

The Northern New Jersey Council Campership Fund was established to assist Scouts who, without financial assistance, would not be able to attend camp. We sincerely believe that all Scouts need an outdoor experience to grow in the Scouting program. The funds used for the Camperships are raised through various sources including the hard work of the members of Lenapehoking Lodge IX, and Order of the Arrow. It is for this reason we ask that only those with true needs apply for a Campership.

There are several points to keep in mind as you complete the application:

- Camperships are only available for "in Council" camps.
- NO deposit is required and NO money should be sent with this completed application.
- Camperships cover **ONLY** one week of camp.
- Amount of request is NOT a guarantee of campership amount.
- Application **MUST** be approved by unit.
- The Scout and their family must complete the first section.
- ALL questions must be answered. **INCOMPLETED APPLICATIONS WILL BE RETURNED.**
- All applications are considered on the basis of the information supplied.
- The application MUST be submitted to the address below BEFORE March 15, 2024, to be considered. <u>Applications that have been returned or received after this date will be considered only if funds</u> <u>become available.</u>
- Campership notifications will be mailed by Mar. 31st (if received by the above date). Family's balance **MUST** be paid by **June 1st** or Campership award is **VOID**.

2024 Camper Fees per Week:

Cub Day Camp at Camp Yaw Paw	\$585.00
Webelos/AOL Scout Camp @ Turrell	\$610.00
Scouts BSA Resident @ Turrell	\$585.00
Scouts BSA Resident @ No-Be-Bo-Sco	\$590.00
Provisional @ Turrell	\$610.00
Provisional @ No-Be-Bo-Sco	\$615.00
Floodwood	\$590.00
Floodwood Provisional	\$615.00

If you have further questions concerning the Northern New Jersey Council Campership program, please direct them to Marissa Sikder at 201-677-1000 Ext: 26 or <u>marissa.sikder@scouting.org</u>

Submit completed application for consideration to:

Northern New Jersey Council Camp Scholarship Boy Scouts of America P.O. Box 670 25 Ramapo Valley Road Oakland, NJ 07436



2024 CONFIDENTIAL CAMPERSHIP APPLICATION

[Please Print Clearly]

This section to be completed by the PARENT or SCOUT:

Scout's Name:					Age:	
Pack #:	Troop #:	Crew #:		_District:		
	<mark>MUST PICK ONE</mark>):					
Date and week num	ber of Attendance (M	UST HAVE):				
If I receive a Campe to the ideals of Scou		te fully in the ca	mping progi	ram, remain acti	ve and supp	port my unit, and live up
Signed By Scout: _					Date:	
To be completed b	y PARENT or GU	ARDIAN:				
Parent or Guardian	ns Name:			Phone:		
	s: Ch					
	eive public assistance					
	al circumstances wh					
Total Fee for Camp:					\$	
	t or other contribution					
Amount of Campers	hip request:					
Signed by Parent or	Guardian (<u>MUST HAV</u>	/ <u>E</u>):			D	Date:
Parent or Guardian I						
To Be Completed	by UNIT LEADER	or COMMIT	<u> "EE:</u>			
Unit participates in (Council Popcorn Sale	es:Yes	No			
Does you Scout have	e a sibling attending	another NNJC ca	ump Yo	es No		
Signed for Unit (MU	UST HAVE):				Date:	
Please PRINT Nam	e:					
Unit Position:				Phone:		