

2010 CAMPERSHIP APPLICATION

Please Print

Reminder: If you have more than one Scout, please submit more than one application.

Scout's Name: _____ Pack/Troop/Crew # _____
Please Circle One

Address: _____ Date of birth: _____

City/State/Zip: _____

Parents' Name: _____ Daytime phone: _____

Number of children, under 18, for which the family is responsible: _____

Number of adults in the household: _____

Please indicate your family's total yearly income, before taxes: \$ _____

Do you currently receive any type of public assistance? YES or NO

If yes please describe _____

Only Muskingum Valley Council registered Scouts are eligible for camperships and must be used at Muskingum Valley Council sponsored camps.

Our son would like financial assistance with (check one):
(Forms must be turned in 6 weeks prior to attending camp for consideration).

_____ Cub Scout Day Camp:	Muskingum June 14-18	Guernsey June 21-25 Please Circle One	Knox July 12-16	Coshocton August 2-6
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_____ Webelos Resident Camp (June 11-13)

_____ Cub Scout Adventure Camp (July 30-August 1)

_____ Boy Scout Summer Camp:	Week 1 June 20-26	Week 2 June 27-July 3	Week 3 July 5-July 10 Please Circle One	Week 4 July 11-July 16	Week 5 July 18-24
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Parent or Guardian's Signature: _____ Date: _____
(Applications will not be accepted without parent's signature)

Please use this space to make any additional comments which you feel would help us make a decision concerning financial aid. Notification will be made by mail within three weeks of receiving this application.

For Office Use Only

Application Received: _____ (Date) Amount Awarded _____

Mail to: Muskingum Valley Council, Attention: Camperships, 734 Moorehead Avenue, Zanesville, OH 43701