



Chickasaw Council, Boy Scouts of America Campership Application

Kia Kima Scout Reservation & District Day Camps
Deadline April 15th of the calendar year of the camp requested

Scouting Information

Troop # _____ Pack # _____ District _____

Scout's Name _____ Phone _____

Address _____ City, State, Zip _____

Email address (please print) _____

Rank in Scouting _____ Date Joined Unit _____

We are applying for assistance toward:

- Kia Kima Cub Resident Camp Kia Kima Boy Scout Summer Camp District Cub Scout Day Camp

Our group is registered for Camp the week of _____

Unit Leader Approval _____

Family Information

Parent or Guardian:

Mother _____ Employer _____

Father _____ Employer _____

Financial Information

To give the camping committee a better understanding of the family's financial status, please provide the following information. The information will be held in strictest confidence. Camperships are generally awarded for no more than 50% of the total camp fee. The unit and parents should pool resources for the difference.

Total Monthly Income \$ _____ Number of Family Members _____

Amount of campership desired \$ _____ *(Every Scout is responsible for a minimum of \$40.00 towards the camp fee.)*

Parent or Guardian Approval _____ Date _____

Additional information that should be considered by the committee:

(continue on back side if necessary)

Council Approval _____ Date _____