

### Campership Application Form

Pack/Troop/Crew # \_\_\_\_\_

Camp Name and Location \_\_\_\_\_

Name of Scout \_\_\_\_\_ Rank \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Other Phone # \_\_\_\_\_

Unit's Chartering/Sponsoring Organization \_\_\_\_\_

Extenuating Circumstances \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*The following fields are required to be considered for a campership. (See next page for \$ chart)*

Number of Family Members Living In Household \_\_\_\_\_

Gross Annual Family Income \$ \_\_\_\_\_

Family Contibution \$ \_\_\_\_\_

Unit (Pack, Troop, Crew) Contribution \$ \_\_\_\_\_

Amount Requested (most will be 1/2 or less) \$ \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please submit to council camping committee for review and consideration.  
You will be notified within two weeks of camp.

*For office use only:*

Date Received: \_\_\_\_\_ Reviewed by CCC: \_\_\_\_\_ Approved: \_\_NO \_\_YES \$ \_\_\_\_\_

Scout Notified: \_\_\_\_\_

If you have questions, please contact the Council Service Center @ 806-358-6500.

Return form to: Council Camping Committee  
 Golden Spread Council  
 401 Tascosa Road  
 Amarillo, Texas 79124

*2009 Sliding Scale for all  
 Council Financial Assistance*

Gross Annual Household Income	Number of people in household (number represents percent of scholarship)					
	2	3	4	5	6	7 +
<b>\$15,260</b>	<b>50%</b>					
<b>\$18,400</b>	<b>40%</b>	<b>50%</b>				
<b>\$21,540</b>	<b>35%</b>	<b>40%</b>	<b>50%</b>			
<b>\$24,680</b>	<b>30%</b>	<b>35%</b>	<b>40%</b>	<b>50%</b>		
<b>\$27,820</b>	<b>25%</b>	<b>30%</b>	<b>35%</b>	<b>40%</b>	<b>50%</b>	
<b>\$30,960</b>	<b>20%</b>	<b>25%</b>	<b>30%</b>	<b>35%</b>	<b>40%</b>	<b>50%</b>

*General Guidelines*

1. Families with gross annual household income of \$23,850 or less will receive a 50% scholarship.
2. Proof of income must be furnished. Valid documentation can be recent tax return, payroll check or stub, or a letter from employer verifying salary.
3. Extenuating circumstances may warrant adjustment, i.e. extra medical expenses, children raised by relatives on fixed incomes, temporary unemployment, or other family emergencies. Adjustments will be made by Council Board appointed representatives.
4. Family income limits based on figures established by the Department of Housing and Urban Development for the Amarillo Metropolitan Statistical Area. (80% of the year 2000 Median Family Income -\$43,000)