2026 Campership Application

APPLICANT INFORMATION

Scout's Legal Name: _____DOB: ___/____/_____

Scout's BSA Id# _____Parents Name(s):_____

Street Address: _____

City, State, Zip: _____

Home Phone: (____)_____ County: _____

District *(see page 4 for map)*:

Circle one:

Blue Elk Frontier Iron Horse Kaw

Lone Bear North Star Soaring Eagle Three Trails

Pack # ___ ___ ___ ___ Troop #___ ___ ___ ___ Crew # ___ ___ ___ ___

2026 CAMP PROGRAM (check one)

_____Bartle Scouts BSA Camp

_____Webelos Resident Camp

_____ Wolf Resident Camp

_____Rotary Scout Camp

_____NYLT _____Woodbadge

_____Naish Scouts BSA Camp

_____Bear Resident Camp

_____Tiger Day Camp

_____Philmont (Expedition #) _____

_____Other (please specify)_____

Return completed application no later than
***March 1, 2026** to:*

Heart of America Council
Boy Scouts of America
10210 Holmes Road
Kansas City, MO 64131-4212

COUNCIL USE ONLY:

District _____ Council _____

Disapproved-Reason _____

_____

Amount: $_____ Date: _____

Scout's Name _____

Please circle camp attending:

Bartle Scout Camp	Naish Scout BSA Camp	Webelos Resident Camp
Bear Resident Camp	Wolf Camp	Tiger Day Camp #of Days___
Rotary Scout Camp	NYLT	Woodbadge
Other (Specify)_____		

Camperships are limited to no more than 65% of the activity cost. Each Scout, his family, or his unit should provide a minimum of 35% of the activity cost. Applications must be submitted no later than March 1, 2026. ***Camperships will be limited to no more than 50% after March 1st.***

***CAMPERSHIP REQUEST – (Must be completed. If not completed, application will be returned.)**

Cost of Camp:	$ _____
Less Cost Provided by the Family:	- _____
Less Cost Provided by the Unit:	- _____
Less Cost Provided by the Chartered Partner:	- _____
Net Campership Request:	$ _____

Max Campership
Bartle $306
Naish $208
Webelos $130
Bear $81
Wolf $72
Tiger $36
Rotary $130

Briefly, explain what the Scout has done to earn a portion of his camp fee. Include Council, unit, and individual fundraising activities.

☐Popcorn Sales Year(s): _____

_____

_____

***FAMILY INFORMATION**

This section must be completed by the Scout's family. Briefly, describe the circumstances that require campership assistance for the Scout to attend camp.

_____

_____

_____

_____

****Total yearly household income $_____*** **(must be completed)**

Does this child qualify for the Federal Free or Reduced Lunch program at school? (circle one)* ***YES* ***NO***

**Name and Age of Other Children (under 18) in the home NOT including applicant*:

1._____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Parent Signature: _____ Date: _____

***(Must be completed. If not completed, application will be returned)**

Scout's Name _____

Registered youth members who cannot pay the full cost of attending council Scouting events may apply for limited financial assistance (campership). This fund assists deserving youth members to attend local council events with a percentage of the cost based on need but is not intended to provide the full fee. Families, units and/or the chartered partner are expected to provide a substantial portion of the fee. **Campership is aid for only <u>ONE</u> camping experience and is not transferable to another camp or Scout.**

Applicants for camperships MUST be a currently registered member of the Heart of America Council, BSA. ***Applications for unregistered persons, <u>incomplete applications</u> and applications without proper signatures will be returned.***

*<u>**If a Scout is granted a Campership and **does not go to camp**, per the Refund Policy, the Unit is responsible for the **full price of Camp** unless the Camping Department is notified before the final payment date. Please view the Refund Policy at www.hoac-bsa.org – camping resources.**</u>*

<u>UNIT ENDORSEMENT</u>

**Please provide as much information as possible to assist the Council Camping Committee in evaluating this application.*

_____

_____

_____

_____

_____

Is this Scout a newly registered youth? Yes - Date Registered _____ No

Does Unit sell popcorn? ◯ Yes ◉ No

Unit Leader Name: _____

Address: _____

City: _____ State: _____ Zip Code:_____

Phone: (_____)_____ Email: _____

Signature: _____ _____

(Unit Leader) (Registered Position)

GENERAL INFORMATION

Note: Funds available for Camperships covered by this application come from funds restricted for use for **youth members** of the Heart of America council attending Heart of America Council camp activities on **Council operated properties** and District Cub Scout Camps. Please read all instructions completely and fill in all spaces. Do not include extra paper with this application.

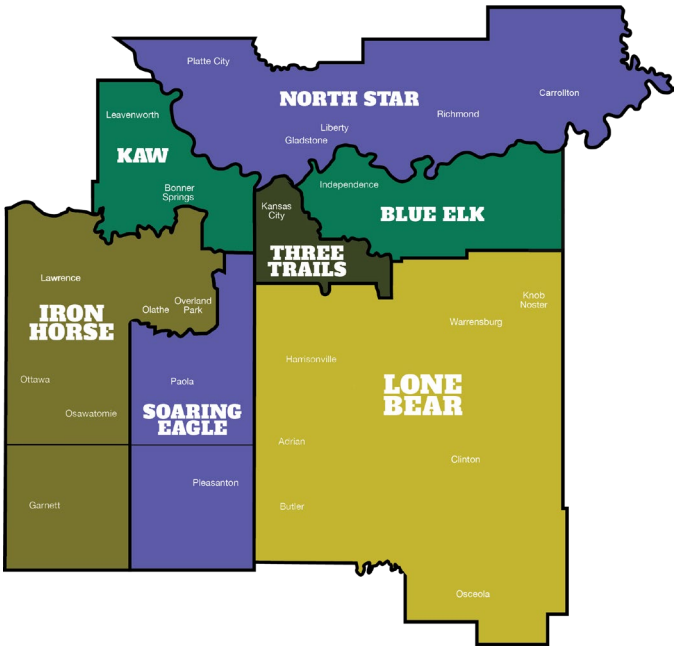
The Council Camping Committee is concerned about the individual needs and the Unit's individual evaluation of the Scout for whom this request is made.

Camperships are limited to no more than 65% of the activity cost. Each Scout, his family, or his unit should provide a minimum of 35% of the activity cost.

Camperships are not transferable, refundable and have no cash value. If a Scout is granted a Campership and does not go to camp, per the Refund Policy, the Unit is responsible for the full price of Camp unless the Camping Department is notified before the final payment date. Please view the Refund Policy at www.hoac-bsa.org.

Applications must be submitted no later than March 1, 2026. Campership amounts will not be included on camp final billing invoices.

CAMPERSHIPS WILL NOT BE ACCEPTED AT CAMP!



INSTRUCTIONS

Please read all instructions completely and fill in all spaces. Do not include any additional paper.

CAMPERSHIP REQUEST

Please list the amount requested including costs provided by the family, and unit. Specific consideration will be given to those that include amounts of need, and not just the maximum amount allowable.

The ninth part of the Scout Law is "A Scout is THRIFTY." A Scout works to pay his own way. The Council Camping Committee is very interested in what the Scout has done to assist his family in providing him with this camping experience. This is a character-building opportunity for the scout to learn the importance of being THRIFTY.

FAMILY INFORMATION

Briefly, describe the general circumstances that require campership assistance for the Scout to attend camp.

UNIT ENDORSEMENT

This area is extremely valuable to the Council Camping Committee. Failure of the Unit to provide this endorsement may result in the application being denied or delayed until further information can be obtained.

Information should be provided in this area as to the Scout's participation in the unit fundraising activities like popcorn sales.

In many cases, the unit will be aware of the financial need of the Scout. Confirmation of this fact or further explanation is helpful. Do not merely repeat information already provided.

In keeping with the policies of Scouting America, the rules for acceptance and participation in camp programs are the same for everyone without regard to race, sex, creed, color, national origin, age or physical limitation.