

2008 CAMPERSHIP APPLICATION

Cost: Cub World - \$165.00 per session Ten Mile River - \$290.00 per week Ten Mile River Provisional Troop - \$310.00 per week
 Cub World - \$305.00 per week Ten Mile River Trek - \$330.00 per week Ten Mile River Specialty Camp - \$310.00 per week

Camp: Aquehonga Catskill Adventure Base Keowa Ranachqua Specialty Camp

Session 1A - July 6 - 9 Session 4A - July 27- 30 Week 0 June 29-July 5 **SPECIALTY CAMP**
 Session 1B - July 9 - 12 Session 4B - July 30 - August 2 Week 1 July 6-12 TMR Provisional Troop (Weeks 1,2,3,4,5,6)
 Session 2A - July 13 - 16 Session 5A - August 3-6 Week 2 July 13-19 National Youth Leader Training (Week 1)
 Session 2B - July 16 - 19 Session 5B - August 6-9 Week 3 July 20-26 Eagle Camp (Week 3 @ Keowa)
 Session 3A - July 20 - 23 Session 6A - August 10-13 Week 4 July 27-August 2 Eagle Camp (Week 5 @ Ranachqua)
 Session 3B - July 23 - 26 Session 6B - August 13-16 Week 5 August 3-9 Webelos Camp (Cub World)
 Week 6 August 10-16 Aquatics Camp (Week 6 @ Keowa)

Check One:

UNIT TYPE: Cub Pack Scout Troop Venture Crew Ship **HOME UNIT #:** _____ **CAMP UNIT #:** _____

BOROUGH: Bronx Council Brooklyn Council Manhattan Council Queens Council Staten Island Council Scoutreach

DISTRICT: Bronx River Lenape Bay Bruekelen Big Apple Founders Pathfinder Tomahawk Aquehonga

Print Clearly:

UNIT LEADER NAME: First Name _____ Last Name _____ Day Phone _____

CAMPER INFORMATION (Print Clearly):

First Name: _____ Last Name: _____

Address: _____ Apt. # _____ City: _____ State: _____ Zip: _____

School Attending: _____ Grade: _____

PARENT/GUARDIAN INFORMATION (Print Clearly):

First Name: _____ Last Name: _____

Address: _____ Apt. # _____ City: _____ State: _____ Zip: _____

Day Time Phone: _____ Evening Phone: _____

Cell Phone: _____ Email: _____

FAMILY INCOME:

Total Yearly Income (Gross): _____

Number of Family Members Residing at Home: ___ Adults ___ Children ___ Children attending Scout camp.

If applying for ADC print Case # _____ We participate in the School Free Lunch Program

DEPOSIT OF \$25 PAID? NO YES **Receipt # if YES** _____

Cash Check # _____

Discover Visa Master Card American Express Credit Card # _____

Expiration Date: _____ Signature: _____

CHECK WHICH APPLY:

Our Unit participated in the following Council activities from June 1, 2007 – May 31, 2008

Product Sales District Bowl-A-Thon Hike-A-thon Family Friends of Scouting

Our Unit scheduled and held the following presentation: Friends of Scouting OR Camp Presentation

Parents: Please fill out Camper Information, Parent Information, and Family Income. **Unit Leader:** Please fill out top of page and a deposit of \$25 per camper per week/session, and Check Which Apply. SEND THE COMPLETED FORM TO: Camping Services, Boy Scouts of America, 350 Fifth Avenue, Suite 430, New York, NY 10118-0350 or Fax: (212) 242-5476. The Greater New York Councils only administers Camperships to registered youth participating at Greater New York Council Camps. *If you require an application for ADC or have any other questions, please call Marcelle Grant at 212-651-2955.*

Box for Office
Use Only

