

**-CAMP AUGUSTINE-**  
**CAMPERSHIP APPLICATION FOR 2013 BOY SCOUT CAMPS**  
(Make copies if necessary)  
Must be submitted by **March 16<sup>th</sup>, 2013 (a must)**

SCOUTS NAME \_\_\_\_\_ TROOP \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ AGE \_\_\_\_\_

AMOUNT OF FINANCIAL ASSISTANCE REQUESTED \_\_\_\_\_  
(Amount requested must not exceed more than half the camp fee).

REASON FOR ASSISTANCE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW MUCH WILL PARENTS PAY TOWARD CAMP FEE? \_\_\_\_\_

DID THE BOY PARTICIPATE IN POPCORN SALES? \_\_\_\_\_

DID THIS BOY PARTICIPATE IN ANY OTHER UNIT FUNDRAISING  
PROJECT? \_\_\_\_\_

DOES THE UNIT HAVE SEPARATE ACCOUNTS FOR THE BOYS THAT CAN BE USED?  
\_\_\_\_\_ IF SO HOW MUCH CAN THE BOY PAY TOWARD CAMP \_\_\_\_\_

HAS THIS BOY EVER PARTICIPATED IN PROGRAMS AT CAMP  
AUGUSTINE? \_\_\_\_\_

UNIT LEADER'S SIGNATURE \_\_\_\_\_

**\*\*\*QUALIFICATIONS:** This Campership is intended to aid a Scout who might  
**NOT** attend Camp Augustine due to financial reasons.  
Only partial camperships are given.

**RETURN BY MARCH 16TH TO:**

**OVERLAND TRAILS COUNCIL:**  
**P.O. BOX 1361**  
**GRAND ISLAND, NE 68802-1361**

**-OR- P.O. BOX 615**  
**NORTH PLATTE, NE 69103-0615**

**DISTRICT APPROVAL** \_\_\_\_\_ **COUNCIL APPROVAL** \_\_\_\_\_

**AMOUNT APPROVED** \_\_\_\_\_

**-CAMP AUGUSTINE-  
CAMPERSHIP APPLICATION FOR 2013 WEBELOS AND CUB RESIDENT CAMPS**

(Make copies only if necessary)  
Must be submitted by **April 15, 2013 (a must)**

SCOUTS NAME \_\_\_\_\_ PACK \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ AGE \_\_\_\_\_

AMOUNT OF FINANCIAL ASSISTANCE REQUESTED \_\_\_\_\_

(Amount requested must not exceed more than half the camp fee).

REASON FOR ASSISTANCE \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOW MUCH WILL PARENTS PAY TOWARD CAMP FEE? \_\_\_\_\_

DID THE BOY PARTICIPATE IN POPCORN SALES? \_\_\_\_\_

DID THIS BOY PARTICIPATE IN ANY OTHER UNIT FUNDRAISING  
PROJECT? \_\_\_\_\_

DOES THE UNIT HAVE SEPARATE ACCOUNTS FOR THE BOYS THAT CAN BE USED?  
\_\_\_\_\_ IF SO HOW MUCH CAN THE BOY PAY TOWARD CAMP \_\_\_\_\_

HAS THIS BOY EVER PARTICIPATED IN PROGRAMS AT CAMP  
AUGUSTINE? \_\_\_\_\_

UNIT LEADER'S SIGNATURE \_\_\_\_\_

**\*\*\*QUALIFICATIONS:** This Campership is intended to aid a Scout who might  
**NOT** attend Camp Augustine due to financial reasons.  
Only partial camperships are given.

**RETURN BY APRIL 15<sup>TH</sup> TO:**

**OVERLAND TRAILS COUNCIL:**

**P.O. BOX 1361**

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**-OR- P.O. BOX 615**

**NORTH PLATTE, NE 69103-0615**

**DISTRICT APPROVAL \_\_\_\_\_ COUNCIL APPROVAL \_\_\_\_\_**

**AMOUNT APPROVED \_\_\_\_\_**