

**2022 CAMPERSHIP APPLICATION**  
**must be submitted at least 1 month before event for consideration**  
**notifications will be sent to the email listed on application**

**HEART OF VIRGINIA COUNCIL, BOY SCOUTS OF AMERICA**

Scout's Name: \_\_\_\_\_ Age (as of 6/1 current year): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone #: \_\_\_\_\_ Unit #: \_\_\_\_\_ Troop Pack (circle one)  
Parent; briefly explain your need for Campership assistance: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My Scout is planning on attending:

- Camp T. Brady Saunders week # \_\_\_\_\_ or the week of \_\_\_\_\_
- Spring Weekend Camp \_\_\_\_\_
- Cub Adventure Camp – Biking Into Spring \_\_\_\_\_
- Cub & Webelos Adventure Camp Session # \_\_\_\_\_
- Cub Scout Day Camp which location \_\_\_\_\_

I will be paying: \$ \_\_\_\_\_ Towards my son's week at camp (suggested 1/3 cost min.)  
Our Pack/Troop will pay: \$ \_\_\_\_\_ Towards my son's week at camp (suggested 1/3 cost min.)  
I am requesting a Campership of: \$ \_\_\_\_\_ Towards my son's week at camp

Has this Scout previously received a campership? \_\_\_\_\_ If so, when and for what event? \_\_\_\_\_

The Council provides many opportunities throughout the year for Scouts to help earn their way to camp. It is important for a Scout to help earn his way to camp. Did the Scout participate in one of the Council sponsored fundraisers this year?

***Scout sold Popcorn and Peanut ( Yes / No )***

***Scout sold Camp Cards: ( Yes / No )***

I understand that this is an application, and in no way guarantees a Campership. I further understand that Heart of Virginia Council ordinarily awards **partial** Camperships in belief that most Scouts can and should earn part of their camp fee.

Camperships are limited to Heart of Virginia Council Scouts Only

Parents Name (please print): \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Parents Signature: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Mail Applications to:**

**Heart of Virginia Council  
8090 Villa Park Drive  
Henrico, VA 23228**

This applicant is a registered Scout within my unit:

Unit Leader's Name (Please print) \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone # \_\_\_\_\_

**Unit Leader's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Service Center Use Only**

Date Received in Office: \_\_\_\_\_ Amount Unit Paid: \$ \_\_\_\_\_ Campership Amount Awarded: \$ \_\_\_\_\_