

Wenasa Quenhotan / Youth Camping Financial Assistance

Please answer all questions (front	and back) to the best	of your abili	ty. Print clearly.
Applicant's name			Current rank
Troop/Crew	District		BSA ID#
Home address		City	ZIP
Home phone		Cell	
Parent/Guardian name			
Parent/Guardian email			
Parent/Guardian address (if differ	ent from Applicant's)_		
Size of family: Children	Adults		
Is parent/guardian employed? Yes	No	Full tim	ne Part time
If spouse, is spouse employed? Ye	s No	Full tim	ne Part time
Ordeal date	_Brotherhood date		Vigil date
What position(s) have you held in	the lodge (including c	eremonies to	eam and election team)?
Describe why you are requesting f	inancial assistance		
When will you attend Ingersoll Sco	out Reservation (dates	5)	
SIGNED APPLICATION INCLUDING	G ESSAY MUST BE REC	EIVED 60 DA	AYS BEFORE THE FIRST DAY OF YOUR WEEK AT
	SUMM	IER CAMP.	
Assistance requested			
Cost of summer camp	\$		Date received:
Amount family will pay	\$		Received by:
Amount applicant will pay (personal funds, camp funds, fundraisers)	\$		Approved Not approved Amount: \$
Total available funds	\$		
Amount of assistance requested	\$		(Essay and signatures required on page 2)

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Applicant name				
Write an essay on why camping is an important part of the Scouting experience. The essay should be a minimum of 250 words, and should be the applicant's original work. If typed or more space is needed, attach separate sheet to application.				
	, PARENT/GUARDIAN AND UNIT LEADER			
I have read and understand the accept the final decision of the Selection	terms of this application and any award that may result from it, and I will on Committee.			
Applicant signature	Date			
Parent/Guardian signature	Date			
I certify that the applicant is a m	nember in good standing in my unit.			
Unit Leader signature	Date			
	District			