

Cape Cod & Islands Campership Request

*Only this form will be accepted as an application for a campership.

* Incomplete forms will not be considered.

*Separate forms are required for individual campers.

*Please print all information clearly.

*A camp registration form must be received with this form.

Campers Name _____ Grade in Sept. _____

Address _____ Town _____

Email _____ (we contact you by email if campership is awarded)

Parent/Guardian Name _____

The Cape Cod & Islands Council *cannot* subsidize 100% of a camper's fees.
Camperships are awarded based on financial need and funding available.
This application is not a guarantee that a campership will be awarded.

Please check one- Cub Scout Day Camp _____ or Ultimate Greenough _____

How many weeks do you want to attend? _____

How much can the family pay each week? _____

Do you have another resource to subsidize camp fees? _____ if yes, how much _____

Gross annual household income \$ _____

Explain briefly why you are requesting campership assistance _____

Signature of Parent/Guardian _____ Date _____

Please forward in a sealed envelope to
Cape Cod & Islands Council
247 Willow Street
Yarmouth Port, MA 02675

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