

Campership Request Form

Longs Peak Council

Scout Camps

Please attach a letter from the camper, explaining why he/she wants to go to camp. Return this form and the letter to the Longs Peak Council, Attn: Cindy, PO Box 1166, Greeley, CO 80632, or fax to 970-330-7961.

Date of Request: _____

Camper's Name: _____

Camper's Troop/Pack/Crew #: _____

Scoutmaster/Cubmaster/Den Leader's Name: _____

Scoutmaster/Cubmaster/Den Leader's Phone: _____

Scoutmaster/Cubmaster/Den Leader's Email: _____

Scoutmaster/Cubmaster/Den Leader's Mailing Address:

Which camp will you be attending this year?(circle one)

Jeffrey Soaring Eagle Elkhorn Camp Laramie Peak Nicol (Cub Scouts)

What dates are you attending camp? _____

The following information is needed in helping the selection committee calculate your camp fees for this year.

Does your unit participate in the Family Friends of Scouting Campaign (did you have an FOS Presentation)?

Yes OR No

Did your unit achieve its Friends of Scouting Camp Goal?

Yes OR No

Did your unit sell popcorn this year?

Yes OR No

Did this camper earn the \$25.00 popcorn gift card?

Yes OR No

Explain to the selection committee a little about this Camper's Need:
