



Chickasaw Council, Scouting America Campership Application

Kia Kima Scout Reservation & District Day Camps
Deadline May 5, 2025 of the calendar year of the camp requested

Scouting Information

Troop # _____ Pack # _____ District _____

Scout's Name _____ Phone _____

Address _____ City, State, Zip _____

Email address (please print) _____

Rank in Scouting _____ Date Joined Unit _____

We are applying for assistance toward:

Kia Kima Cub Resident Camp Kia Kima Scouting America Summer Camp District Cub Scout Day Camp

Our group is registered for Camp the week of _____

Unit Leader Approval _____

Family Information

Parent or Guardian:

Mother _____ Employer _____

Father _____ Employer _____

Financial Information

To give the camping committee a better understanding of the family's financial status, please provide the following information. The information will be held in strictest confidence. Camperships are generally awarded for no more than 50% of the total camp fee. The unit and parents should pool resources for the difference.

Total Monthly Income \$ _____ Number of Family Members _____

Amount of campership desired \$ _____ (Every Scout is responsible for a minimum of \$50.00 towards the camp fee.)

Parent or Guardian Approval _____ Date _____

Additional information that should be considered by the committee:

(continue on back side if necessary)

Council Approval _____ Date _____