



Occoneechee Lodge Expense Reimbursement Form

Request

This form must accompany all requests for reimbursement made against Occoneechee Lodge. No compensation will be provided otherwise. All expenses must be approved by Key 11 member with authority over the corresponding department prior to disbursement of funds. Please submit within 30 days.

Submit request to Paul Huffman

Name:

Mail Check to:

Date	Description	Tax	Total
Total Amount to be Reimbursed		Total:	
		\$	\$

Key 11 Approval

Authorized by (print):

Cost center: ☐ Administration
☐ Programs
☐ Communication
☐ Finance
☐ Other (Key 3 only) _____

Committee (optional):

I authorize the payment of the above total amount to said member, to be debited against the above cost center and committee (if applicable).

Authorization (signature):

Date:

Official Use Only

Status: ☐ Paid (Cash)
☐ Paid (Council issued check)
☐ Rejected

Total Amount:

Reimbursed by:

Invoice No.:



Ordeal Candidate Information & Medical Form

Ordeal Event Fee: \$50; a \$10.00 late fee (\$60.00 total) will also be assessed if you register within the last 7 days prior to the Ordeal. In order to become a member of the Order of the Arrow (the OA), you must complete the Ordeal weekend on one of three weekends during the coming year:

May 17-19, 2024 (Spring Inductions)
Register here: <http://www.lodge104.net/calendar/spring-inductions/>
September 20-22, 2024 (Fall Fellowship)
Register here: <http://www.lodge104.net/calendar/fall-fellowship/>

Member Information			
Name:		Email:	
Address:			
City:	State:	Zip Code:	
Phone: ()	Unit Number:	Date of Birth:	
Circle Chapter (District): <div style="display: flex; justify-content: space-between;"> <div> Ilau Machque (Black River) Eluwak (Mawat) Saponi (Shakori) Kiowa (Impessa) </div> <div> Lauchsoheen (LaFayette) Netopolis (Dogwood) Netami (Crosswinds) </div> <div> Neusiok (Neuse River) Mimahuk (Highlander) Temakwe (Awahili) </div> </div>			
Do you: <input type="checkbox"/> have any medical restrictions? <input type="checkbox"/> currently take any medication? <input type="checkbox"/> have any dietary restrictions?		Explain:	
Health Insurance Company:		Policy #:	
Have or subject to: <input type="checkbox"/> Convulsions <input type="checkbox"/> Asthma <input type="checkbox"/> Fainting Spells <input type="checkbox"/> Bleeding disorder <input type="checkbox"/> Diabetes <input type="checkbox"/> Heart Trouble <input type="checkbox"/> Allergy to medication, food plant, animal, or insect <input type="checkbox"/> Any condition requires special care, medication, or diet <input type="checkbox"/> NONE OF THE ABOVE APPLY		Explain:	
Have difficulty with (check if yes): <input type="checkbox"/> Eyes, ears, nose, throat <input type="checkbox"/> Digestion <input type="checkbox"/> Bed-wetting <input type="checkbox"/> Lungs <input type="checkbox"/> Sleepwalking		Explain:	
<input type="checkbox"/> Any condition now requiring regular medication?		Name of medication:	
Date of Immunizations: Tetanus toxoid _____ Polio _____ Mumps _____ Pertussis _____ Diphtheria _____ Measles _____ Rubella _____			
This health history is correct so far as I know, and the person herein described has permission to engage in all prescribed activities, except as noted. In the event that I cannot be reached in an emergency, I hereby, give permission to the physician selected by the adult leader in charge to hospitalize, secure proper anesthesia, or to order			
Candidate		Parent or guardian	
Signature:		Signature (if candidate is under 18 years):	
x _____ Date: _____		x _____ Date: _____	
		Home Phone:	Mobile Phone:

** Registration is due 1 week prior to every event to allow food and program materials to be ordered in the most economical way. Registrations made within 1 week of the event are subject to a \$10 late registration fee. See the Lodge refund policy on the website for additional information. www.lodge104.net/registration/refunds

Adult Nomination Form

Description

Nomination of an adult Scouter for membership in the Order of the Arrow should take place only when the adult's job in Scouting will make Order of the Arrow membership more meaningful in the lives of the youth membership. Nomination of an adult Scouter is **not** to be considered as an honor or recognition of service to Scouting. Return this form to the Lodge Adviser **by April 15 for the May Ordeal, or by August 15th for the September Ordeal.**

Adviser@lodge104.net

Candidate Information

(Please Print)

Name: First	M. I.	Last	Nickname
-------------	-------	------	----------

Address	City	Zip+4
---------	------	-------

Phone (home) _____ / _____ / _____ Phone (business) _____ / _____ / _____ E-mail _____

Primary Registration: Unit Type and No. _____ District _____ Birth Mo. _____ / _____ / _____
Month _____ Day _____ Year _____

Current Primary Registered Position with BSA

Date of last Youth Protection Training

BSA ID Number

Dietary Restrictions

Qualifications

Adult leaders in units: Each year, upon holding a troop or team election for youth candidates that results in at least one youth candidate being elected, the unit committee may nominate adults to the lodge adult selection committee. The number of adults nominated can be no more than one-third of the number of youth candidates elected, rounded up where the number of youth candidates is not a multiple of three. In addition to the one-third limit, the unit committee may nominate the currently-serving unit leader (but not assistant leaders), as long as he or she has served as unit leader for at least the previous twelve months. Recommendations of the adult selection committee, which consists of the lodge adviser, the chairman of the council committee on which the lodge adviser serves, and the lodge staff adviser, with the approval of the Scout executive, serving as Supreme Chief of the Fire, will be candidates for induction, provided the following conditions are fulfilled:

- Selection of the adult is based on the ability to perform the necessary functions to help the Order fulfill its purpose, and not for recognition of service, including current or prior achievement and positions.
- The individual will be an asset to the Order because of demonstrated abilities that fulfill the purpose of the Order.
- The camping requirements set forth for youth members are fulfilled.
- The adult leader's membership will provide a positive example for the growth and development of the youth members of the lodge.

Recommendations

The above named adult leader fulfills the necessary requirements (as listed above) and is duly recommended by the unit committee for membership in the Order of the Arrow: (sign appropriate lines for nominee's primary registration)

Unit Nomination: _____ / _____ / _____
Unit Leader (signature) Committee Chairman (signature) Month Day Year

District/Council Nomination: _____

Signature _____ Position _____ Month _____ Day _____

Year

LODGE APPROVAL (Lodge Use Only)

Lodge Selection Committee / / A / R



Troop Representative Registration Form

Representative Information															
Name:		Email:													
Address:															
City:	State:	Zip Code:													
Phone: ()	Unit Number:	Circle O/B/V: Ordeal Brotherhood Vigil													
Circle Chapter: <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 33%;">Ilau Machque</td> <td style="width: 33%;">Lauchsoheen</td> <td style="width: 33%;">Neusiok</td> </tr> <tr> <td>Eluwak</td> <td>Netopalis</td> <td>Mimahuk</td> </tr> <tr> <td>Saponi</td> <td>Netami</td> <td>Temakwe</td> </tr> <tr> <td>Kiowa</td> <td></td> <td></td> </tr> </table>				Ilau Machque	Lauchsoheen	Neusiok	Eluwak	Netopalis	Mimahuk	Saponi	Netami	Temakwe	Kiowa		
Ilau Machque	Lauchsoheen	Neusiok													
Eluwak	Netopalis	Mimahuk													
Saponi	Netami	Temakwe													
Kiowa															
Scoutmaster Approval															
Signature:		Term of Position:													
Date:		Phone:													
Form Submission															
Submit to: OA Troop Representative Chairman Trooprep@lodge104.com															





Occoneechee Lodge 104 Official Vigil Honor Petition, Page 2 of 2

Qualifications

The following information to assist the Vigil Selection Committee in consideration of the nominee. Nominators are encouraged to provide as much information as possible on each candidate. Letters of recommendation, resumes, and other such attachments are welcomed and encouraged. A good rule of thumb is to assume that the Vigil Committee knows nothing about your candidate. This will insure that all important information will be presented for careful consideration. A clearly written, well thought out and researched petition will be much appreciated. Thank You.

Nominee's Name:

Unit Affiliation:

Unit Activities of Special Note:

Chapter Affiliation:

Chapter Activities of Special Note:

Lodge Positions and Activities of Special Note:

Suggested Vigil Guide Name:

Phone:

Email:

Note: the Guide MUST be a Vigil member.

I believe this Nominee is deserving of the Vigil Honor because:

Nominated by (please print):

Phone:

Please submit online at lodge104.net/vigil by the Sunday EC of Spring Pow-Wow



Founder's Award Petition

Description				
<p>The Founder's Award was established to recognize certain registered, active Brotherhood or Vigil Honor members of the Order of the Arrow at the local Lodge level. The member's life should reflect a spirit of achievement in his everyday activities. Through his everyday life he should show:</p> <div style="text-align: center; padding: 10px;"> <p>An understanding of the world he lives in</p> <p>A determination to do his best at all times</p> <p>An enthusiasm while doing what he believes should be done</p> <p>A belief in, and a commitment to, those "things of the Spirit"</p> <p>(Brotherhood, Cheerfulness, and Service)</p> </div>				
Requirements				
Last Name:		First Name:		Middle Initial:
Circle One:	Scout	Venturer	Scouter	Date (MM/DD/YYYY):
Address:				
City:		State:		Zip:
Unit Affiliation:				
Inducted into the Order of the Arrow as Ordeal in (MM/YYYY):				
Sealed membership with Brotherhood in (MM/YYYY):				
Elevated to Vigil Honor (if applicable) in (MM/YYYY):				
<p>How has the person named in this petition reflected the 'spirit of achievement' in his Scouting and non-Scouting activities?</p>				
<p>Approvals :</p> <div style="display: flex; justify-content: space-around; margin-top: 20px;"> <div style="text-align: center;"> <p>_____</p> <p>Chapter Chief</p> </div> <div style="text-align: center;"> <p>_____</p> <p>Chapter Adviser</p> </div> </div>				

RETURN THIS APPLICATION TO THE CHAIRMAN OF THE FOUNDERS' COMMITTEE NO LATER THAN LUNCH DURING SPRING INDUCTIONS.



Ceremonialist Recognition Patch Award Form

Applicant Information				
Name:				
Membership Level:				
Chapter name:				
Award Checklist				
1. Are you under 21 years of age?				Yes No
2. Are you an active (dues paid, council registered) member in the Lodge?				Yes No
3. Please list the type of ceremony(ies), the principle portrayed, and number of times performed in the last year.				Yes No
	Spring Powwow	Spring Inductions	Fall Fellowship	Other
Principle				
#Of Ceremonies				
Other Includes call outs, arrow of light, and vigil ceremonies				
4a. Have you been evaluated by an official ceremonies advisor?				Yes No
4b. For which Ceremony?				
5. Please check mark your evaluation rating for the following categories:				
	Fair	Good	Excellent	Exemplary
Memorization				
Movements				
Bearing				
Gestures				
Clarity				
Expression				
6a. What attire was worn for your ceremony? Circle.				
Native American Attire		Full Field Uniform		All black
6b. Was your attire evaluated to be appropriate?				Yes No
Chairman of the Lodge Ceremonies Sub-Committee (print and sign):				
Advisor of the Lodge Ceremonies Sub-Committee (print and sign):				

RETURN THIS FORM TO THE CHAIRMAN OF THE LODGE CEREMONIES SUB-COMMITTEE AT FALL FELLOWSHIP.



Dancer Recognition Patch Award Form

Applicant Information	
Name:	
Membership Level:	
Chapter name:	
Award Checklist	
Occoneechee Lodge offers recognition for its dancers. The Dancer Recognition Patch is available for lodge members who meet the following requirements:	Circle Yes or No:
1. Are you under 21 years of age?	Yes No
2. Are you an active (dues paid, council registered) member in the Lodge?	Yes No
3. Indicate your dance style in the space provided.	
4. On the back of this form or in a separate attachment, please list all the parts of a full set of regalia for your respective dance style.	
5. Have you participated and competed at a Lodge event? If so, list the event, competition, and placing in the space below.	Yes No
6. a. Have you competed at a Conclave and/or National Order of the Arrow Conference? OR b. Have you participated in TWO non-Lodge, non-Section, or non-scout Powwows? If so, list each event and event date.	Yes No
Chairman of the Dance Sub-Committee (print and sign):	
Advisor of the Dance Sub-Committee (print and sign):	

RETURN THIS FORM TO THE CHAIRMAN OF THE LODGE DANCE SUB-COMMITTEE AT FALL FELLOWSHIP



104 Service Award Form

Description			
<p>The 104 Service Award is given to a youth or adult that is always helping the Lodge succeed. On this sheet you will need to keep a record of how much time you put in to help the Lodge. A minimum total of 104 hours is required for the award. Working at home for the Lodge will be accepted. Lodge events and Summer Camp Staff do not apply toward the worked hours. The award consists of a Service Patch, which is not a flap, to be worn on the uniform. You are responsible for recording your hours using this form and submitting it on time.</p>			
Requirements			
Applicant Name: _____			
Date	Hours Worked	Project Worked On	Location
Hours worked at Occoneechee Scout Reservation			
Worked at home:			
Total hours worked:			

RETURN THIS FORM TO THE CHAIRMAN OF THE LODGE RECOGNITIONS COMMITTEE BY THE END OF THE EXECUTIVE COMMITTEE MEETING AT FALL FELLOWSHIP.



Troop Service Award Form

Requirements		
Date	Leader's Initials	
		1. Camp with your troop on at least eight (8) weekends and a long term camp within one year.
		2. Help two (2) Scouts achieve the First Class rank.
		3. Participate in a troop service project (or projects) totaling six (6) hours.
		4. Attend at least 85% of troop meetings within a year.
		5. Participate in a long-term camping experience, such as summer camp.
		6. Take a troop leadership role.
		7. Show Scout Spirit by living up to the Scout Oath and Law.
		8. Wear the proper uniform correctly.
<p>_____ has met the requirements for Occoneechee Lodge's Troop Service Award on ____/____/____</p> <p>in</p> <p>Troop # _____, in _____ chapter.</p>		
<p>Scoutmaster (print and sign)</p>		

RETURN THIS FORM TO THE CHAIRMAN OF THE LODGE RECOGNITIONS COMMITTEE BY THE END OF THE EXECUTIVE COMMITTEE MEETING AT FALL FELLOWSHIP.



Summer Camp Staffer Award Form

Requirements	
Name:	Phone:
Address:	
City:	State:
Zip:	
1. Are you a member of Occoneechee Lodge #104?	Yes No
2. Have you paid your dues up to date?	Yes No
3. Have you served the whole contractual agreement of no less than three weeks, without being fired or quitting?	Yes No
4. Have you served this period as a staffer Camp Durant?	Yes No
5. Have you been recommended by the Camp Director or Program Director?	Yes No
<p>I meet the above criteria for this Award. In addition, I have not already received a Summer Camp Staffer Award for this term of service.</p> <p>Applicant (print and sign)</p> <p>Summer Camp Director or Program Director (print and sign)</p>	

RETURN THIS FORM TO THE CHAIRMAN OF THE LODGE RECOGNITIONS COMMITTEE BY THE END OF THE EXECUTIVE COMMITTEE MEETING AT FALL FELLOWSHIP.



Friend of the Thunderbird Award Petition

Nominee Information

Individual Name:

Business Name:

Reason for nomination:

Nominating Member Information

Member Name:

Phone:

Date:

Submission of this petition is only such and does not guarantee the nominee recognition. The lodge Key 3 will make final Decisions.

Please return to Lodge Chief by the conclusion of Fall Fellowship.



Ceremonies Award Form

Applicant Information	
Name:	
Circle Ceremony (all that apply): PreOrdeal Ordeal Brotherhood Cross-Over	Circle your membership: Ordeal Brotherhood Vigil
Circle Chapter: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">Ilau Machque</div> <div style="text-align: center;">Lauchsoheen</div> <div style="text-align: center;">Neusiok</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">Eluwak</div> <div style="text-align: center;">Netopalis</div> <div style="text-align: center;">Mimahuk</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">Saponi</div> <div style="text-align: center;">Netami</div> <div style="text-align: center;">Temakwe</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;">Kiowa (</div> </div>	
Award Checklist	
Occoneechee Lodge offers recognition for its performers of ceremonies. The Ceremonies Award Patch is available for lodge members who meet the following requirements:	
1. Are you under 21 years of age?	Circle Yes or No:
2. Have you made your ceremony outfit?	Yes No
3. Have you performed in 5 ceremonies for the Lodge?	Yes No
4. Are you an active (dues paid, council registered) member in the Lodge?	Yes No
5 a. (PreOrdeal) Have you competed at Spring PowWow, Conclave, or NOAC?	Yes No
b. (Ordeal Team) Has your ceremony performance been critiqued by a qualified individual?	Yes No
c. (Brotherhood Team) Have you competed at conclave or NOAC?	Yes No
Confirmation by Lodge Ceremony Committee:	

RETURN TO RECOGNITIONS COMMITTEE CHAIRMAN AT FALL FELLOWSHIP



Lodge 104 Ceremony Ring Addition Request Form

It is required that this form be filled out prior to any extensive work done on Lodge 104 Ceremony Rings. In order to maintain authenticity, practicality, and safety in ceremonies rings, additions to any ring must be approved by the ceremonies committee and the Vice Chief of Program. This form is required for structure, relocation of a ring, and removal of any elements submitted and approved using this form. Elements essential to a ceremony ring (candle holders, seating, and rostrums) can be built or repaired without prior approval. Any elements that are in rings as of November 2010 do not need to be approved by the committee but will be subject to review and possible removal or alteration.

Requirements:

1. Submit the following completed form to the ceremonies committee chairman and/or advisor.
2. Have the Ceremonies Committee Chairman and Vice Chief of Program sign off on the proposed project.

Application:

Letter of Ring: _____

Please refer to the ring map which labels each ring by letter.

Sponsoring Chapter of the Ring: _____

Description of Addition Being Requested (include sizes, location in ring, types of material, and any other information applicable to the project):

Signatures:

Ceremonies Committee Chair: _____ Date: _____

Vice Chief of Program: _____ Date: _____

The purpose of this form is to insure safety and authenticity in ceremony rings. Accordingly, if an addition to a ring is completed without approval, the ceremonies committee reserves the right to suspend the performance rights of the chapter in question until the addition has been altered or removed to meet Ceremonies Committee and Vice of Program approval.



Application for the Naming of a Ceremony Ring

It is the wish of Occoneechee Lodge that, due to the limited number of ceremony rings, naming them shall be an honor reserved for those who have provided invaluable service to not only their chapter but the lodge and dedicated themselves to the growth of young men. Past recipients of this distinction have included nationally renowned Arrowmen and individuals instrumental to making Lodge 104 the great lodge it is. Since there are a limited number of ceremony rings, naming rings after individuals should not be done without careful consideration and a true belief of the individual's exemplary dedication and service to the Lodge.

Requirements for Application

1. Receive approval from the Vice Chief of Programs, Ceremonies Sub-Committee Chairman, and Lodge Key 3 prior to making a motion at an Executive Committee Meeting.
2. Receive approval from the Executive Committee by a 75% majority positive vote.
3. Provide and attach a written essay that outlines how the nominee has influenced their chapter, the lodge, and been instrumental to the benefit and growth of the young men in our lodge.
4. Attach a picture of the nominee to the application.
5. The application must include, in addition to the essay written by the applicant (mentioned in requirement 3), no fewer than three letters written from three different Arrowmen to the Lodge Executive Committee. These letters are to outline how the nominee demonstrates the qualities listed above, in the introductory paragraph, and why they are worthy of such a high honor.
6. The applicant or chapter may send a lobbyist to EC to testify on the nominee's behalf.

When picking a name for a ring, it is suggested that, if a ring is already named, the original name be honored in the new name. For example, if the "Uncas" ring is being renamed to honor E. Urner Goodman, the new ring should honor both people e.g. "The Uncas-Goodman Ring". The original name of a ring should never be dropped entirely and it is suggested that, if a ring name already honors multiple people, other aspects of the ring such as the fire lay be named instead. If possible, it is preferable that any one ring NOT be named for more than one person.

**CEREMONY RING NAMING Application:**

Chapter Name: _____

Current Letter and Location of Ring: _____

Proposed Name of Ring: _____

Applicant (Arrowman Proposing Naming): _____

Approval Signatures:

Ceremonies Sub-Committee Chairman: _____ Date: _____

Vice Chief of Programs: _____ Date: _____

Lodge Chief: _____ Date: _____

Lodge Advisor: _____ Date: _____

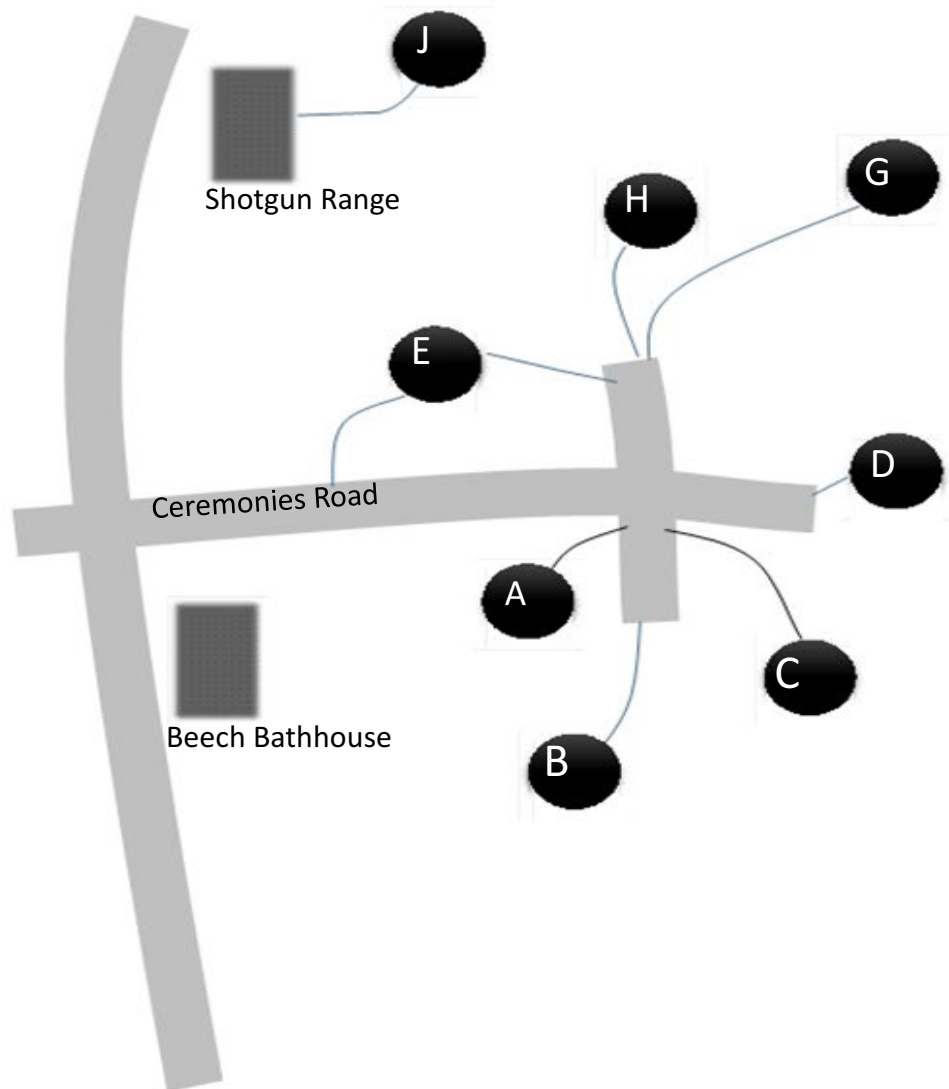
Lodge Staff Advisor: _____ Date: _____

Essay:

Provide and attach an essay detailing how the proposed Arrowman has influenced their chapter, Lodge 104, and how they have been instrumental to the benefit of the young men in the lodge. This essay should provide definitive evidence for why the Lodge should immortalize the proposed person's name. The essay should be in the style of a formal letter to the Executive Committee of Lodge 104.



CEREMONY RING MAP





UNIT OF EXCELLENCE AWARD PETITION

As the primary platform where the Scouting program is delivered to youth, the unit is the most vital and important level of the BSA for the Order to support.

The Order of the Arrow Unit of Excellence Award seeks to identify those units, and the leaders within them, who excel at incorporating the OA into their annual planning. This award is intended to provide a tool for lodges to recognize, incentivize, and operationalize unit-level participation in Order of the Arrow programs.

The OA Unit of Excellence Award criteria recognize units that invite the lodge to conduct quality unit elections, participate in lodge events and meetings, and operate a complete OA Troop/Team Representative program. Our hope is that units that complete these criteria will benefit from the support programs that the Order of the Arrow has implemented to strengthen unit-delivered program.

Requirements		
OA Rep Initials	OA Adviser Initials	
		<p>Leadership: <i>Implement the Troop/Team OA Representative and Troop/Team OA Representative Adviser programs in your unit for the current year.</i></p> <ul style="list-style-type: none"> - OA Representative name: - OA Rep Adviser name: - Feature an annual presentation at a Court of Honor by the Troop/Team OA - Representative on the Order of the Arrow with a focus on the accomplishments of unit members.
		<p>Participation: <i>Promote lodge events and provide transportation to all Arrowmen wishing to participate.</i></p> <ul style="list-style-type: none"> - At least 50% of unit OA members attend at least one lodge event in addition to their Ordeal.
		<p>Elections: <i>Schedule a unit election with the chapter election team annually.</i></p> <ul style="list-style-type: none"> - Hold an election and have 100% of elected Scouts or Team Members complete their Ordeal.
		<p>Planning: <i>Maintain an active planning process that prevents overlap between lodge and chapter events with unit events.</i></p> <ul style="list-style-type: none"> - Review the OA calendar with the Patrol Leader's Council or Team Leadership during annual troop/team program planning and schedule unit events so that 100% of troop/team programs do not overlap with any full lodge events.
		<p>Conversion: <i>Demonstrate the depth of your unit's OA program through Brotherhood Conversion.</i></p> <ul style="list-style-type: none"> - At least 30% of eligible troop/team members seal their membership in the Order by converting to Brotherhood.
CERTIFICATION		
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;"> <p>_____</p> <p style="font-size: small;">Unit Type/Number</p> </div> <div style="width: 80%; text-align: center;"> <p>has met the requirements for the Order of the Arrow Unit Award of Excellence and is ready to be recognized at the annual Lodge Banquet.</p> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;">Scoutmaster</p> <p style="text-align: center;"><i>(print and sign)</i></p> </div> <div style="width: 50%;"> <p style="text-align: center;">Email Address or Phone Number</p> </div> </div>		



Occoneechee Lodge Sharon A. McDonald Campership Application

Occoneechee Lodge 104 offers financial assistance for those wishing to attend Order of the Arrow High Adventure service programs. This campership is limited to the following programs:

- Order of the Arrow Philmont Trail Crew
- Order of the Arrow Ocean Adventure
- Order of the Arrow Wilderness Voyage
- Order of the Arrow Canadian Odyssey
- Order of the Arrow Summit Experience

Depending on the number of applications received and the funds available, not all applicants may receive funding. The deadline for applications is the Spring Inductions Lodge Executive Committee Meeting. Applications may be submitted earlier than the deadline.

Requirements:

Be a youth member of Occoneechee Lodge 104 in good standing. Meet all the requirements necessary to attend the program that you choose.

Date Campership Submitted: _____

Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____

BSA ID#: _____

Chapter: _____

Which program will you attend? _____

On What Dates: _____

Please write a short paragraph below detailing why you should receive this Campership and how participating in your chosen program will help you serve the Scouting Movement. You may add an additional page if necessary.

Lodge Chief's Signature: _____

Lodge Adviser's Signature: _____

Lodge Staff Adviser's Signature: _____