

Troop 49 Summit, Wisconsin  
Western Trails District of the Potawatomi Area Council, BSA

## Valentine Camp Scholarship Request Form

Date Submitted: \_\_\_\_\_  
Name of Scout: \_\_\_\_\_ Current Rank: \_\_\_\_\_  
Years in Troop 49: \_\_\_\_\_ Years in Cub Scouts: \_\_\_\_\_

### To be completed by the scout:

Camp or Activity: \_\_\_\_\_ Dates: \_\_\_\_\_  
Registration Fee of Camp or Activity: \_\_\_\_\_ Funds requested: \_\_\_\_\_  
(If unsure check with event Coordinator or Scoutmaster)

Please explain why attending this camp or activity is important to you: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please explain your participation in Troop 49 fundraising activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please explain your participation in service activities in Troop 49: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Positions held in Troop 49: \_\_\_\_\_

List the other camps you have attended and/or plan to attend this year:  
\_\_\_\_\_

### To be completed by the family:

Please briefly explain your reason to seek funding: \_\_\_\_\_  
\_\_\_\_\_

Funds family can contribute the Camp or Activity: \_\_\_\_\_

**Please submit this form to Charter Org Rep Ed Marek**

Updated 2020