REQUEST FOR CAMP REFUND

File with the camp business manager **BEFORE** departing camp.

<table>
<thead>
<tr>
<th>COUNCIL ___________________________</th>
<th>UNIT # __________</th>
<th>RESERVATION # ______________________</th>
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<tr>
<td>DATE__________________ NAME ____________________________ CAMP ______________________</td>
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**Please note:** Notice must be received by August 10th to be considered

Refunds will be mailed to committee chair by September 30.

We are requesting a refund for the following Scout(s) for the following reasons:

<table>
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<tr>
<th>NAME OF SCOUT</th>
<th>REASON FOR REFUND <em>(BE SPECIFIC PLEASE)</em></th>
<th>APPROVED</th>
<th>DENIED</th>
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- Cancellations on or before April 30: all fees paid, are transferable within the reservation. If the entire unit reservation is cancelled, $350 deposit per Unit is forfeited.

- Cancellations between May 1 and two weeks prior to camp: a refund of all fees paid, less a program cost recovery fee of 60% of the per Scout fee, is made.

- Within two weeks of camp, a refund for fees paid minus the 60% program cost recovery fee will only be made for:
  
  A) family moves out of council
  B) there is a death or serious illness in his immediate family requiring his attendance
  C) becomes ill and unable to attend camp
  D) if a Scout becomes ill while attending camp and is sent home by the camp medical personnel, the Scout shall be entitled to a pro-rated refund based on the fee less a program cost recovery fee of 60%.

***No refund requests submitted after August 10th will be considered.

FOR CAMP USE ONLY:

Received by _______________________________________________ Date: __________________________

FOR OFFICE USE ONLY:

Refund amount approved $ __________ Refund Denied _________________ Date _____________________

By _______________________________________ Reason Denied _____________________________________