

TROOP 160 MEMORIAL SCOUT CAMP

MSC CAMPING ESSENTIALS APPLICATION

- Scouts should be recommended based on financial need.
- Scouts may only be recommended to receive one piece of equipment per calendar year.
- Please Select The Item Requested

Hiking Boots...Men Size _____ OR Women Size _____

Winter Boots...Men Size _____ OR Women Size _____

Sleeping Bag...Is Scout Over 6 Feet Tall? Yes / No

Backpack

Rain Poncho

SCOUT INFORMATION:

Name:

Street:

City:

State:

Telephone:

E-mail:

PARENT INFORMATION:

Name:

Street:

City:

State:

Telephone:

E-mail:

SCOUT GROUP INFORMATION:

Group Name:

City & State:

Troop Leader:

Street:

City:

State:

Telephone:

E-mail:

GROUP LEADER RECOMMENDATION:

Please attach a letter to the Selection Committee that describes why you believe that this scout has limited financial means. Describe how the requested equipment will benefit the scout. Please use specific examples when writing your recommendation.