

CAMPMASTER APPLICATION

Name _____ Age (must be 21) _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email _____ Cell Phone _____

SCOUTING EXPERIENCE

Number of Years in Scouting: Adult _____ Scout _____ Rank achieved as a youth? _____

Current Registered Position: _____ District _____

Leadership Positions Held: _____

Honors or awards received: _____

TRAINING EXPERIENCE: (list location and date of training)

IOLS: _____ Cub Scout Specifics: _____

Boy Scout Specifics: _____ Wood Badge: _____

Hazardous Weather Training: _____ Youth Protection Training: _____

Outdoor Experience: _____ Other: _____

CAMPING EXPERIENCE:

Camp(s) attended and year (s) _____

High Adventure Experience: _____

National Jamboree: _____ World Jamboree: _____ Order of the Arrow: _____

I will serve to the best of my ability as campmaster at least two weekends during the year as scheduled. I agree to complete Campmaster Training. I will follow the rules and regulations of the Campmaster Guidebook and the Sam Houston Area Council.

Camps

I would like to serve as a campmaster at: Camp Strake Camp Brosig Bovay Scout Ranch El Rancho Cima

Date _____

Complete Form and Return to:

Sam Houston Area Council, BSA Attn: Campmaster Program P O Box 924528 Houston, Texas 77292-4528
Fax: 713-865-9199 or 713-865-9125 Email Address: camping@shac.org

Approved By _____
Program Director/ Director of Rangers

FOR CHIEF CAMPMASTER'S USE

Dates of Campmaster Service

Approved	_____	_____	_____
Campmaster Training	_____	_____	_____
Apprentice Weekend	_____	_____	_____
Campmaster Certificate	_____	_____	_____