

Prairielands Council, Boy Scouts of America

## Camp Refund Request

- ✓ Cub Scout Day Camp
- ✓ Cub Scout Adventure
- ✓ Boy Scout Summer Camp



Mail Completed Form & Attachments to:

Camp Refund Review  
 Prairielands Council, BSA  
 P.O. Box 6267  
 Champaign, IL 61826-6267

### Council Camp Refund Policy

Planning for summer camp begins months prior to the first session. This includes hiring staff, ordering food, supplies, materials and patches. Because planning is based on projected attendance, requests for refunds of registration fees are reviewed and considered based on individual cases. For a refund to be considered, this form must be submitted within the timeframe below and must have a valid reason for not attending as planned. Not all refund requests are guaranteed to be approved.

- One month prior to camp session to be attended: Full refund considered
- Three weeks prior to camp session to be attended: 75% refund considered
- Two weeks prior to camp session to be attended: 50% refund considered
- One week prior to camp session to be attended: 25% refund considered
- Beginning of camp session to be attended: No refund

Refunds for a camper leaving camp after the session has begun will not be considered. Refunds are not available for Family Fun Fest, Parent & Pal or other district/council activities.

All refunds, regardless of date of request, will be reviewed at the close of the camping season. Approved refunds will be mailed to the indicated recipient on or before August 30.

### To Be Completed by Parent

Scout's Name \_\_\_\_\_ Pack/Troop # \_\_\_\_\_

Camp (Check)  Cub Scout Day Camp  Cub Scout Adventure Camp  Boy Scout Summer Camp

Week Scheduled to attend camp: \_\_\_\_\_

Reason for Refund Request (Check all that apply)

- Medical Condition; please attach explanation *and* Physician's Note
- Family Emergency; please attach explanation
- Personal Conflict; please attach explanation
- No Longer Active in Scouting

Parent's Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### For Office Use Only

Date Received \_\_\_\_\_ Approved \_\_\_\_\_ Entered in System \_\_\_\_\_ Mailed \_\_\_\_\_