Falkner Family Foundation

Supporting Youth Fitness Around Your Town and Around the Globe

Application for campership* for Girl Scout Camp Butano Creek 2019

Name _____

Date of Birth _____ Desired Unit at Camp Butano Creek 2019 _____

School/City _____ Grade in **Fall** 2019 _____

Teacher name _____

Teacher email address _____

Parent/Guardian _____

Parent/Guardian Mailing Address _____

_____

Phone number _____

Parent/Guardian E-mail Address _____

Please print clearly. You will be notified via email with your results.

_____ _____

Parent/Guardian Signature Homeroom teacher, verifying grade average is at least "C"

In the space provided, in the camper's **own hand-writing**, please tell us why you want to go to Camp Butano Creek this summer.

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Tax ID#- 26-0508369

**Camper required to pay deposit to reserve space at camp.*

Return to: **Camp Butano Creek, 1771 Dawn Street, Livermore, CA 94550,**
postmarked by **Friday, March 30, 2019** to be considered for this campership.
Those selected will be notified by Friday, April 12, 2019.