



Nathan and Irene Dale Opportunity Fund

Through a generous gift to the council endowment fund, the Nathan and Irene Dale Opportunity Fund was created to assist Scouts and Scouting units overcome financial barriers above and beyond the capacity of the council's current campership fund. Each year the committee meets to review applications for special support of camping and joining assistance new unit startup, unit equipment, special events like National Scout Jamboree and council activities like Rendezvous etc.

Camp scholarships, in addition to what may be provided by council camperships will be considered for individual Scouts and should be applied for with this application. Equipment and Scouter Assistance requests will be considered through Unit Applications only.

All applications should be directed to the Nathan and Irene Dale Opportunity Fund, 2525 Martin Luther King Jr. Blvd, Eugene, OR 97401 by May 1st each year. Applications received after May 1st will be considered based on funds available.

Please fill out either the individual Scout application or the unit application and return promptly.

Unit Application for Assistance

Nathan and Irene Dale Opportunity Fund
Oregon Trail Council
2525 Martin Luther King Jr. Blvd, Eugene, OR 97401
541-485-4433

UNIT TYPE _____
UNIT # _____
DISTRICT _____
AMOUNT _____

FOR COMMITTEE USE ONLY	
DATE	_____
AMOUNT	_____
INITIALS	_____
CERTIFICATE #	_____

**Scholarships are not transferable &
have no cash value.
ALL blanks must be filled in**

If you are applying for Unit funds please fill out below

UNIT INFORMATION

COMMITTEE CHAIR _____
ADDRESS _____
CITY/STATE/ZIP _____
HOME PHONE _____ BUSINESS (if available) _____

TOTAL COST	\$ _____
MONEY SET ASIDE FOR THIS PURPOSE	- _____ (subtract)
COST PROVIDED BY UNIT FUNDRAISERS	- _____ (subtract)
COST PROVIDED BY OTHER SOURCES	- _____ (subtract)
NET SCHOLARSHIP REQUEST AMOUNT	_____

Explain the reason for the request and how it will benefit your entire unit.

UNIT INFORMATION

This section **MUST** be filled out. List how many outings your unit goes on, and how this money will relate to that. Also, list all fundraising the unit participated in this year (or will participate in) including council and unit fundraising.

OF YOUTH IN UNIT _____ **# OF REGISTERED ADULTS** _____

**CHARTERED ORGANIZATION
ENDORSEMENT**

Please provide as much information as possible to assist the Dale Opportunity Fund Committee in evaluating this application. Review the application to make sure that there are as many comments as appropriate and applicable.

Is there anything else the committee should consider?

Signature _____

C.O.R. _____ I.H. _____



In keeping with the policies of the Boy Scouts of America, the rules for acceptance and participation in the camp programs are the same for everyone without regard to race, sex, creed, color, national origin, age or physical limitation.



Scout Application for Assistance

Nathan and Irene Dale Opportunity Fund
Oregon Trail Council
2525 Martin Luther King Jr. Blvd, Eugene, OR 97401
541-485-4433

UNIT # _____

DISTRICT _____

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have no cash value.
ALL blanks must be filled in

FOR COMMITTEE USE ONLY

DATE _____

AMOUNT _____

INITIALS _____

CERTIFICATE # _____

If you are applying for a scholarship for a Scout please fill out below

SCOUT INFORMATION (by Scout family)

CUB _____ SCOUT _____ VARSITY _____ VENTURER _____

SCOUT NAME _____ RANK _____

ADDRESS _____

CITY/STATE/ZIP _____

PARENTS NAME(S) _____

HOME PHONE _____ BUSINESS (if available) _____

TOTAL CAMP COST \$ _____

COST PROVIDED BY FAMILY - _____ (subtract)

COST PROVIDED BY UNIT FUNDRAISERS - _____ (subtract)

COST PROVIDED BY OTHER SOURCES - _____ (subtract)

NET SCHOLARSHIP REQUEST AMOUNT _____ (Cannot be more than 50% of total camp cost)

Briefly explain what the applicant has done to earn a portion of his fee. Include Council, unit and individual fund raising activities such as popcorn or candy/meat stick sales.

FAMILY INFORMATION

This section **must** be filled out by the Scout's family. Briefly describe the circumstances, including financial matters, which require campership assistance for your child to attend camp. **PLEASE READ THE INSTRUCTIONS.**

Signature _____
Relation to Scout _____
Occupation of Father _____ Employer _____
Occupation of Mother _____ Employer _____

UNIT ENDORSEMENT

by: Unit Leader Committee Chair Other _____
(an adult not related to the applicant)

Please provide as much information as possible to assist the Council Campership Committee in evaluating this application. Review the application to make sure that there are comments on as many of the five factors on page one as is possible or appropriate. Your independent evaluation of the financial needs is very valuable. **PLEASE READ THE INSTRUCTIONS.**

OF YOUTH IN UNIT _____ # OF YOUTH GOING TO CAMP _____

Did Scout Participate in Council Fundraisers? Popcorn Candy Bars/Beef sticks Scout did not participate

Signature _____
(Please print)

Name of Unit's Campership Contact: _____

Phone Number: _____ Email: _____

Mailing Address: _____ City: _____ State: OR Zip: _____

Unit Leaders name: _____ Committee Chairs Name: _____

Phone #: _____ Phone #: _____

Email: _____ Email: _____



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