

Camp Babcock-Hovey Campmaster Application

Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

E-mail: _____

Pack/Troop/Crew/Post/Ship: _____ District: _____

Have you met the requirements to be a fully trained:

Cubmaster Scoutmaster Crew Advisor Commissioner

Please describe your CURRENT level of First Aid/CPR/AED training (Include any advanced training or instructor status): Please attach photocopy of both sides of cards.

Are you certified as any of the following: Rifle/Shotgun/Airgun Range Officer

Archery Range Officer COPE Instructor Aquatic instructor

Please attach photocopy of both sides of cards.

What programs could you offer to units during your service as Campmaster, if asked? Ex. Cooking demonstrations, nature hikes, native lore, etc.

What prompted you to apply to become a Campmaster? Please let us know.

Signed: _____ Campmaster Applicant

For office use only:

Approvals: District Key 3: _____ Campmaster Chief: _____

Campmaster Training Date: _____ by: _____

Camp Babcock-Hovey Campmaster Application

Return to: BSA Camp Babcock-Hovey Campmaster Chief 3685 Pre-Emption Rd. Geneva NY 14456
Fax: 315-789-2227 or E-mail: glord001@rochester.rr.com