Camp Yawgoog Scout Reservation Narragansett Council BSA

61 Camp Yawgoog Road PO Box 14777

Rockville, RI 02873 East Providence, RI 02914

Request for Refund

Please make checks payable to:

Type of Refund: \_\_\_\_\_Individual \_\_\_\_\_ Troop \_\_\_\_\_ Other (explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Camp Information (circle one) MB SB TP YLE FFA Webelos

Week: 1 2 3 4 5 6 7 8 Campsite: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for request: (check all that apply):

1. \_\_\_\_\_ Scout(s) had to attend summer school at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_ Scout(s)’s family relocated to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_ Early Departure: Reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_ Unaware of discounts ( ) Brother ( ) Second week

5. \_\_\_\_\_ Campership not applied (Amount) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. \_\_\_\_\_ Other (explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- |
| Reason | Name | Address | Phone | Amount |
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Note: Camperships are refundable to the donor only. If there were any Camperships please note amount: $\_\_\_\_\_\_\_\_\_\_\_\_

Refunds will only be made out to the Scout’s respective troop. Provisional scouts will be made out the parent or guardian.

Office Use Only

Accounting Information: Pay by (Mark one) \_\_\_\_\_\_ Check \_\_\_\_\_\_ Unit Credit \_\_\_\_\_\_ Cash Refund

Account to be charged: 1-6701-711-21 (Camp Fees) Amt: $ \_\_\_\_\_\_\_\_\_\_\_\_

1-6703-711-21 (Meals) Amt: $ \_\_\_\_\_\_\_\_\_\_\_\_

1-6704-711-21 (Program) Amt: $ \_\_\_\_\_\_\_\_\_\_\_\_

1-8010-714-21 (Den Chief Credit) Amt: $ \_\_\_\_\_\_\_\_\_\_\_\_

1-8910-711-25 (Campership Shea) Amt: $ \_\_\_\_\_\_\_\_\_\_\_\_

1-\_\_\_\_-\_\_\_-\_\_ (other) Amt: $ \_\_\_\_\_\_\_\_\_\_\_\_

Amount paid to camp: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Less applicable charges: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Refund: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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