National Camping Award Application

Troop that present a well-balanced camping program to their Boy Scouts are those that measure up to the standards of the National Camping Award. This award is presented annually to the troop that has an outstanding outdoor program. The minimum requirements for the National Camping Award are:

Check appropriate boxes:

1. **PATROL ACTIVITIES**
   Each patrol of the troop participated in at least three of the following activities during the last 12 months:
   
   A. Attended camporee.................................................................
   B. Held a day hike...........................................................................
   C. Did a conservation project.........................................................
   D. Attended a school retreat...........................................................
   E. Conducted a Scout Anniversary Month outdoor project...
   F. Conducted a father and son campout...........................................
   G. Attended a Klondike Derby...........................................................

2. **SHORT-TERM CAMP**
   All patrols in the troop were represented in four or more Short-term campouts during the past 12 months.................

3. **LONG-TERM CAMP**
   All patrols in the troop were represented in a long-term (6 or more consecutive days and nights) camp and at least 50% of the total boy membership in the troop attended.......

4. **APPLICATION**
   Present this completed application either to the Heart of America Council Camping Services or your district camping chairman.

   Boy Scout troops may earn the National Camping Award by meeting the requirements during a calendar year, a charter year, or any other 12-month period as determined by the patrol leader’s council.

I certify that Troop ______ District _______ Council #_______ sponsored by _____________________________

Has met the requirements for the National Camping Award as indicated above.

DATE__________ Signed_________________________________________________________

(unit leader)

Address________________________________________________________

City, State, Zip___________________________________________________