

PHILMONT 2018 PHILMONT CONTINGENT

The total estimated cost of the Chester County Council's 2018 excursion to Philmont is \$2350. The below coupons reflect payments due after the required \$360 deposit. Please send the right portion of the coupon with payment retaining the left for your records. If not paying online, please mail payment along with the appropriate coupon to the Chester County Council, BSA, 504 S. Concord Road, West Chester, Pa 19382-5261. Checks should be made out to CCCBSA. Due to the uncertainty of travel and tour costs an additional 5th payment may be necessary. Every effort will be made to announce the need for and the amount of in April 2018.

Every year Philmont typically makes scholarship funds available to Council. This availability is generally announced mid-fall with requests needing to be submitted by letter/email by mid-January. If a scholarship is requested, one payment may be delayed until recipient's names have been announced. The amount granted is dependent upon the number of requests.

If you are encountering financial challenges and are having difficulties making payment by the due date, please email us at philmont@cccbsa.org so we can discuss possible adjustments to our payment schedule.

Payment can also be made securely online at cccbsa.org/make-a-payment.

PAYMENT #1 \$497.50 Due by: 6/30/2017 Retain this part for your records, mail coupon (outlined with dashed lines) with your payment.	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px dashed black;">PHILMONT 2017 PAYMENT #1</th> <th style="text-align: right; border-bottom: 1px dashed black;">Total Amount Enclosed \$ _____</th> </tr> </thead> <tbody> <tr> <td colspan="2" style="padding: 5px;">Please list each participant for which you are making payment and amount you are paying for each.</td> </tr> <tr> <td style="padding: 5px;">Name: _____ Unit#: _____ Amount \$ _____</td> <td style="padding: 5px; text-align: right;">Youth _____ Adult _____</td> </tr> <tr> <td style="padding: 5px;">Name: _____ Unit#: _____ Amount \$ _____</td> <td style="padding: 5px; text-align: right;">Youth _____ Adult _____</td> </tr> <tr> <td style="padding: 5px;">Name: _____ Unit#: _____ Amount \$ _____</td> <td style="padding: 5px; text-align: right;">Youth _____ Adult _____</td> </tr> </tbody> </table>	PHILMONT 2017 PAYMENT #1	Total Amount Enclosed \$ _____	Please list each participant for which you are making payment and amount you are paying for each.		Name: _____ Unit#: _____ Amount \$ _____	Youth _____ Adult _____	Name: _____ Unit#: _____ Amount \$ _____	Youth _____ Adult _____	Name: _____ Unit#: _____ Amount \$ _____	Youth _____ Adult _____
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PAYMENT #5 To be announced in April 2017. If any additional payment is due, it is usually less than \$100. Due by: 5/15/2018 Retain this part for your records, mail coupon (outlined with dashed lines) with your payment.	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px dashed black;">PHILMONT 2017 PAYMENT #5</th> <th style="text-align: right; border-bottom: 1px dashed black;">Total Amount Enclosed \$ _____</th> </tr> </thead> <tbody> <tr> <td colspan="2" style="padding: 5px;">Please list each participant for which you are making payment and amount you are paying for each.</td> </tr> <tr> <td style="padding: 5px;">Name: _____ Unit#: _____ Amount \$ _____</td> <td style="padding: 5px; text-align: right;">Youth _____ Adult _____</td> </tr> <tr> <td style="padding: 5px;">Name: _____ Unit#: _____ Amount \$ _____</td> <td style="padding: 5px; text-align: right;">Youth _____ Adult _____</td> </tr> <tr> <td style="padding: 5px;">Name: _____ Unit#: _____ Amount \$ _____</td> <td style="padding: 5px; text-align: right;">Youth _____ Adult _____</td> </tr> </tbody> </table>	PHILMONT 2017 PAYMENT #5	Total Amount Enclosed \$ _____	Please list each participant for which you are making payment and amount you are paying for each.		Name: _____ Unit#: _____ Amount \$ _____	Youth _____ Adult _____	Name: _____ Unit#: _____ Amount \$ _____	Youth _____ Adult _____	Name: _____ Unit#: _____ Amount \$ _____	Youth _____ Adult _____
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Refund Policy:

If you need to withdraw, please notify us immediately by emailing amy.dalesandro@scouting.org. The cancellation date will determine the amount of the refund. The refund amount is based upon the date the request is submitted; and will be dependent upon the financial commitment up to this point to Philmont, the airline and the transport company.