

Church Camp Scholarship Application 2007

St Peter's United Church of Christ

Applications will be evaluated by the Christian Education Ministry Team at their earliest convenience. Submission of application does not ensure that any or the entire amount requested will be granted. Application must be filled out completely to be considered. Applications should be returned to the church office.

Camper Information:

Camper's Name

Date of Birth (MM/DD/YYYY)

Street Address/City/State/ZIP

Have you attend church camp before? (Please circle)

YES / NO

Home Phone Number

Parent(s)/Guardian Name

Please indicate the name of the camp you are planning to attend. (Example: Jr High Adventure Camp at Pilgrim Center)

What dates are you planning on attending camp?

Will there be other children from your family attending church camp this year? (Please circle) YES / NO

Scholarship amount requested: \$_____

In the space provided please explain why you feel attending church camp will help you to grow your faith.

X

Camper's Signature

X

Parent/Guardian Signature