

**2010 Scholarship Application**  
**Northeast, Ozark Lakes & Southeast Gateway Areas Camp Ministry**

Participant Name:

Parent/Guardian Name(s):

Mailing Address:

City, State & Zip

Home Phone:

Parent Day or Cell Phone :

Local Church Name & City:

Pastor's Name:

Church Phone:

Camp/Event Attending:

Dates:

Event Fee:

NE Area Support Requested:

Sources of Support:

Family.....

Local Church.....

Other (not including this request).....

Amount of Support:

\$

\$

\$

Statement of need for scholarship support:

Parent Signature & Date:

Pastor/Youth Sponsor Signature & Date:

Office Use Only	Date Received:	Date Reviewed:	<u>Amount Granted (by Fund Source):</u> PR/AR: General: Other:	Reviewer:
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