**UNITED METHODIST MINISTRIES OF SALEM – KEIZER (UMMSK)**

Church Camps – Scholarship Financial Support Request

YOUTH INFORMATION

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member of the UMMSK Youth Group (circle): Yes No

Briefly describe your participation in Youth Group (e.g. attendance, programs, fund-raising):

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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CAMP(S) INTERESTED IN ATTENDING (see *Go Camping* website below for full list, details)

(Circle) *Suttle Lake Magruder* Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELL US WHY YOU ARE INTERESTED IN ATTENDING CAMP

ANY SPECIAL CONSIDERATIONS YOU’D LIKE TO SHARE RELATED TO YOU REQUEST?:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AMOUNT YOU/YOUR FAMILY CAN CONTRIBUE TO CAMP COSTS: $ \_\_\_\_\_\_\_\_\_\_\_

AMOUNT YOU ARE *REQUESTING* IN SUPPORT FROM UMMSK: $ \_\_\_\_\_\_\_\_\_\_\_

Youth Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian -- Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

>Camp & Retreat Ministries of Oregon and Idaho: <http://www.gocamping.org/>

>Policy on scholarships, support for church camps – please see reverse side of this sheet 🡪

*Please submit this form to: Heather Hawkins, Youth Director; or to your church’s youth coordinator*

**This form must be submitted 5 Weeks prior to the start of the camp, for full consideration**