

**IT'S NOT TOO LATE TO GET A SCHOLARSHIP TO
ATTEND**

A ONE-WEEK SUMMER CAMP AT WARREN WILLIS!!

(Monday to Saturday)

Choose a Week: (June 26-July 1) OR (July 10-15)

At least 14 children and youth from *First United Methodist Church* are planning to attend an awesome one-week camp, where they will have fun activities (swimming, hiking, cooking, fishing, canoeing, fun games) learn about God, make friends from all around Florida and participate in amazing Praise services each evening (always voted the #1 fun activity by the kids). This United Methodist Camp near Leesburg, provides a wonderful week of fun and growing in faith.

One of our parents, Karen Parry, will be joining the many counselors from the camp itself (we'll be looking for more parents to join her as volunteer chaperone counselors, as well as drivers).

I know this is short notice, but if you are thinking your child might like to go, and think you will need some help financially (scholarship), the application must be postmarked by April 1, and needs a signature from the church (backside). Please look at this form and either get it back to the church by Friday (March 30) or arrange to meet Karen Parry, who will sign and mail it for you on Saturday (April 1).

Your registration forms are not so urgent and can wait a little longer, but the camp fills up pretty fast for each week. There may not be an opening during the same week that your child's friends are going, if you do not move quickly.

**QUESTIONS: Please call Karen Parry: 239-289-3080 or
Jeri Brunton: 904-704-9611.**

Check out the Website: WARRENWILLISCAMP.ORG

Welcome 2017 Campers



Scholarships must be postmarked or faxed by April 1, 2017 to be considered by the Scholarship Committee. Any Forms postmarked after April 1, 2017 will not be considered. Failure to follow the instructions could result in being disqualified from receiving a Scholarship. You will receive notification from the scholarship committee during the third week in April. Please DO NOT send your Scholarship Application in with your Summer Camp Registration Form. This could delay the receipt of your Scholarship Application and cause you to miss the deadline.

You can mail your form to: 4990 Picciola Rd. Fruitland Park, FL 34731 or fax it to 352-787-8650

SCHOLARSHIP APP

SECTION 1 - CAMPER INFO

This section needs to be filled out by a PARENT/GUARDIAN or CHURCH CONTACT PERSON.
Please do not have the camper fill out this section. Please print legibly so to ensure we process your information correctly.

NAME OF CAMPER:

ADDRESS OF CAMPER:

CITY/STATE: ZIP:

DAYTIME TELEPHONE NUMBER:

PARENT/GUARDIAN E-MAIL:

CHURCH NAME:

CHURCH CITY:

CIRCLE ONE:

CLASSIC CAMPS* ~~TRIP CAMPS~~
 ELEMENTARY CAMP ~~SUWANNEE RIVER TRIP~~
 MIDDLE SCHOOL CAMP ~~WILDERNESS WEEK~~
 HIGH SCHOOL CAMP

*If Classic Camp, what week are you attending: SPECIALTY CAMPS
 CREATIVE SPIRIT

CAMPER'S ETHNIC GROUP:
 (Please check one. The information gathered for this category is for statistical purposes only)

___ HISPANIC ___ CAUCASIAN ___ AFRICAN AMERICAN
 ___ NATIVE AMERICAN ___ ASIAN ___ OTHER

CHOOSE
 6/26-7/1 OR
 7/10-7/15

SECTION 2 - FINANCIAL INFO

This section needs to be filled out by the PARENT/GUARDIAN of the camper. In order for us to assess your financial need, please provide us with as much information as possible. Please note that we are unable to give full scholarships.

HOW MUCH CAN YOU CONTRIBUTE?

Please estimate how much funding you will receive from the following sources:

PERSONAL FINANCING \$ _____

LOCAL CONGREGATION (FUNDRAISING, ETC.) \$ _____

OTHER (OTHER FAMILY MEMBERS, ETC.) \$ _____

HOW MUCH ARE YOU REQUESTING FROM THIS SCHOLARSHIP COMMITTEE \$ _____

Are they applying for a scholarship also? (circle one) Y N

ANNUAL FAMILY INCOME OF:

(Please check one)

___ \$0 - \$12,500 ___ \$12,500 - \$25,000
 ___ \$25,000 - \$37,500 ___ \$37,500 - \$50,000
 ___ \$50,000 - \$62,500 ___ \$62,500 - \$75,000
 ___ \$75,000 - \$87,500 ___ \$87,500 - \$100,000
 ___ OVER \$100,000

Are there any other campers attending the Warren W. Willis Summer Camp from your household? (circle one) Y N

Please list their names here: _____

SECTION 3 - CHURCH ENDORSEMENT

This section must be filled out completely by the SENIOR PASTOR, YOUTH DIRECTOR, CHILDREN'S DIRECTOR or CHURCH CONTACT PERSON of a Florida Conference United Methodist Church. If this section is not filled out completely by one of the above listed people, the camper will not be considered for a Scholarship.

CHURCH ENDORSEMENT

INSTRUCTIONS TO THE CHURCH REPRESENTATIVE:

Please fill this out completely (**SIGN, FILL OUT NAME OF CHURCH, AND COMPLETE THE COMMENT SECTION- ALL SECTIONS MUST BE FILLED OUT**) by providing any information that you can to help inform the scholarship committee of why this camper is in need of a scholarship for Summer Camp. The Scholarship Committee uses the information you give to determine not just what camper receives a scholarship, but also what amount will be given. Any information that you are able to share will be helpful in determining the need of this camper.

CHURCH REPRESENTATIVE'S NAME AND POSITION:

NAME OF CHURCH: FIRST UNITED METHODIST - NAPLES

PLEASE PROVIDE INFORMATION THAT WOULD HELP THE SCHOLARSHIP COMMITTEE IN ASSESSING THE NEED LEVEL OF THIS CAMPER:

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SECTION 3 - PARENT ENDORSEMENT

This section should be filled out by the PARENT/GUARDIAN. This section must be completed in order for this scholarship to be considered. Please provide information to the scholarship committee explaining why your child is in need of a camp scholarship.

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I WANT TO GO TO SUMMER CAMP...

CHILD

This section should be filled out by the camper. They need to write one to two sentences explaining why they want to go to Summer Camp this year. If this section is not filled out, the camper might not be considered for a Scholarship.

"I WANT TO GO TO SUMMER CAMP..."

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TWO WAYS TO REGISTER:

1. ONLINE AT: WWW.WARRENWILLISCAMP.ORG
2. BY MAIL: 4990 PICCIOLA RD
FRUITLAND PARK, FL 34731

ENTERED / REG. STAMPS

(FOR OFFICE USE ONLY)

2017 SUMMER CAMP REGISTRATION FORM

PART 1 - CAMPER DATA

Has camper attended Warren Willis Summer Camp before? **Y** **N**

NAME OF CAMPER:

(First)

(Middle)

(Last)

CONTACT INFORMATION

The email address and mailing address listed as Camper's Primary will be the ones used by the camp for all correspondence.

CAMPER'S PRIMARY EMAIL ADDRESS:

CAMPER'S PRIMARY ADDRESS:

(Street/PO Box)

(City)

(State)

(Zip)

NAME FOR NAME TAG:

GENDER: **M** **F**

DATE OF BIRTH:

(MM/DD/YY)

CAMPER'S GRADE IN SEPTEMBER 2017:

CAMPER'S PRIMARY PHONE NUMBER:

PART 2 - FAMILY DATA

GUARDIAN 1:

(First Name)

(Last Name)

(Home Phone)

(Work Phone)

(Relationship)

(Cell Phone)

(Email Address)

(Physical Address: Street/PO Box, City, State, Zip)

Lives with Guardian 1:

FULL TIME

PART TIME

May camper be released to this guardian?

Y

N

GUARDIAN 2:

(First Name)

(Last Name)

(Home Phone)

(Work Phone)

(Relationship)

(Cell Phone)

(Email Address)

(Physical Address: Street/PO Box, City, State, Zip)

Lives with Guardian 2:

FULL TIME

PART TIME

May camper be released to this guardian?

Y

N

EMERGENCY CONTACT

Emergency contact is in addition to Mother / Father or Guardian Information. It must be a different person than who is listed above. This person will be contacted in an emergency should we not be able to reach the Mother, Father or Primary Guardians.

(Name)

(Phone)

(Relationship to Camper)

PART 3 - CHURCH INFO

This section must be completed for each camper. If you do not know all of the information for this section, please contact your local church to obtain this information. This is a very important piece of the camp registration, even if you are applying as an individual.

FIRST UNITED METHODIST-NAPLES

(Church Name)

(City)

JERI BRUNTON

(Church Contact Name)

239-262-1033

(Church Phone)

ADMIN@FUMCNAPLES.ORG

(Church Contact Email Address)

PART 4 - ADDITIONAL INFO

(To be completed by the Parent / Guardian)

FREE T-SHIRT SIZE:

— YOUTH LARGE (14-16) — ADULT SMALL — ADULT MED
— ADULT LG — ADULT XL — ADULT XXL

CAMPER'S ETHNIC GROUP:

(Optional, used for statistical purposes only)

— ASIAN — AFRICAN AMERICAN — CARIBBEAN — HAITIAN
— HISPANIC — NATIVE AMERICAN — WHITE
— PACIFIC ISLANDER — OTHER

PART 5 - CHOOSING A CAMP SESSION

STEP 1: Indicate the age group of the camper: **CHECK ONE BOX ONLY!**

- ELEMENTARY SCHOOL** - Students in 4th or 5th grade(s) as of September 2017
- MIDDLE SCHOOL** - Students in 6th, 7th or 8th grade(s) as of September 2017
- HIGH SCHOOL** - Students in 9th, 10th, 11th or 12th grade(s) as of September 2017 and Graduating Seniors

STEP 2: In the boxes below, mark a first (1), second (2), and third (3) choice for camp sessions at Warren W. Willis Camp, or a Specialty/Trip camp held at various locations. If your first choice is not available, we will automatically place you in your second or third choice. We will place you on a waiting list for your first choice, if the choice(s) you have selected are not available.

CLASSIC CAMP SESSIONS (\$420.00) AT THE WARREN W. WILLIS UNITED METHODIST CAMP.

Camp weeks begin on Monday afternoon and end on Saturday morning.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6/5	6/12	6/19	6/26	7/3	7/10	7/17	7/24

SPECIALTY CAMP SESSIONS

- CREATIVE SPIRIT CAMP** (\$420.00) (at the WWW Camp)
 (July 3-7, 2017) Students in 4th - 12th grade as of September 2017, and seniors from 2017
 If applying for Creative Spirit Camp (ONLY), Please choose one of the following skills:
 Interpretive Dance Musical Performance Instrumental Band 2-Dimensional Art Drama
- SUWANNEE RIVER TRIP** (\$420.00) (starts and ends at the WWW Camp)
 (July 19-23, 2017) Students in 9th, 10th, 11th and 12th grade(s), and seniors from 2017
- WILDERNESS WEEK** (\$440.00) (Starts and ends at the WWW Camp.)
 (July 17-21, 2017) Students in 9th, 10th, 11th and 12th grade(s), and seniors from 2017

CHOOSE ONE OF THESE 2

ROOMMATE REQUEST:

Camper's are housed according to age group. Specialty Camps and Classic Camps are two different sessions and CANNOT room together. You may only request one roommate. If you write more than one name, only the first name listed will be entered. Please double check that your requested roommate is in the same age group and will be attending the same week.

PART 6 - PAYMENT SUMMARY

Total Camp Tuition Fee for this Camper: \$

A. Amount of deposit or full payment enclosed with this application: \$

(must be at least \$100 & cannot be a Warren Willis Camp scholarship)

PAYMENT FOR THIS CAMPER IS BEING MADE BY: (*Make Checks Payable to Warren Willis Camp)

- PERSONAL CHECK*** Check# In the amount of \$ Name on Check:
- CHURCH CHECK** Church Check# In the amount of \$ Name on Check:
- DEBIT/CREDIT CARD** VISA, MASTER CARD, AMERICAN EXPRESS or DISCOVER (please circle one) Amount to be Charged:
- Debit/Credit Card # Name on Card: Expiration: 3 Digit Card ID:
- Card Holder's Name & Signature
 (Print Name) (Sign Name)

PART 7 - AUTHORIZATION/SIGNATURE OF PARENT/GUARDIAN REQUIRED

Your signature confirms that you have read and agree to the policies and consents of the Warren W. Willis Summer Camp Program, which can be found at www.warrenwilliscamp.org.

PARENT/GUARDIAN SIGNATURE: **DATE:**