



## Camp Mission Meadows Camper Scholarship Request Form

To request a grant from the Mission Meadows Scholarship Fund, please fill out this form and mail it to Mission Meadows with the camper's registration form and deposit. (The deposit will be refunded if scholarship assistance is not granted.)

Name of Camper \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_\_

Name of Camper's Parents/Guardians \_\_\_\_\_

Name of Sponsoring Church \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_\_

Church Contact Person \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_\_

Amount of scholarship requested \$ \_\_\_\_\_

Amount Church will contribute \$ \_\_\_\_\_

Balance to be paid by camper \$ \_\_\_\_\_

Camp Week Desired: First Choice \_\_\_\_\_

Second Choice \_\_\_\_\_

Please mail form to:  
Camp Director  
Camp Mission Meadows  
P.O. Box 42  
Dewittville, NY 14728

This form may be photocopied if additional forms are needed.