

# Bethel Christian Camp Scholarship Application

Camper(s) name: \_\_\_\_\_

Week of camp registered: \_\_\_\_\_

## Camper Family Information:

Head of Household: \_\_\_\_\_

Contact information (phone, email): \_\_\_\_\_

Number of people in household: \_\_\_\_\_

Household income:

- \$10,000-\$20,000
- \$20,000-\$25,000
- \$25,000-\$30,000
- \$30,000-\$40,000
- \$40,000 and above

## Scholarship Information:

All registrations require a \$40 registration fee. The \$40 applies towards the total cost of the camp week. Use the following formula to let us know what scholarship amount would be helpful to your family for the remaining camp balance. It is our joy and desire to provide a camp opportunity for your family. Your participation in the remaining balance helps us extend our financial resources to as many children as possible. Only 1 scholarship per summer is available per child.

### Overnight Camp per child

Camp cost:	\$225.00
Your registration fee:	<b>-\$ 40.00</b>
Remaining balance:	\$185.00
I can contribute:	-\$ _____
Scholarship amount requested:	\$ _____

### Day Camp per child

Camp cost:	\$130.00
Your registration fee:	<b>-\$ 40.00</b>
Remaining balance:	\$ 90.00
I can contribute:	-\$ _____
Scholarship amount requested:	\$ _____

Please provide a brief explanation of the reason for the scholarship and how it will be of assistance to your family:

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**Your child's registration will not be complete and no slots will be held until the following is received: Registration Form, Scholarship Application, and \$40.00.**