



2022 SUMMER CAMP SCHOLARSHIP APPLICATION
Christian Church in Florida (Disciples of Christ)
The Retreat at Silver Springs
6455 E Silver Springs Blvd., Silver Springs, FL 34488
Email: adminassistant@fldisciples.org



Scholarships must be postmarked or emailed by **May 15th, 2022** to be considered by the Scholarship Committee to The Retreat at Silver Springs at the address above. Please follow the instructions in each of the sections listed below. Failure to follow the instructions could result in being disqualified from receiving a Scholarship. You will receive notification from the scholarship committee during the first week of June. 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.

SECTION ONE: Camper Information

This section needs to be filled out by a PARENT/GUARDIAN or CHURCH CONTACT PERSON.

Name of Camper: _____

Address of Camper: _____

City/State: _____ Zip: _____

Phone: _____ Parent/Guardian E-mail: _____

___check here if parent/guardian is a member of a congregation of the Christian Church (Disciples of Christ) in Florida

Home Church: (include city) _____

Grade completed in school by June 2022 _____

<u>Camp</u>	<u>Grade Completed</u>	<u>Date</u>	<u>Cost*</u>	<u>Deadline</u>
___ High School Camp	Grades 9-12	June 12 - 18	\$375	June 1
___ Chi Rho Camp	Grades 6-8	June 19 - 24	\$375	June 6
___ Junior Camp	Grades 3-5	June 26 - 30	\$335	June 13
___ UNO Camp	Grades K-2	July 9 - 10	\$115	June 20
___ High School Canoe Camp	Grades 9-12	July 10 - 16	\$335	July 1
___ Graduates' Camp	Graduated H.S. 2018-2021	July 21 - 24	\$175	July 10
___ Family Camp	For the whole family	Sept 2 - 5	\$150	Aug 15

Check One:

*On or after June 1st

Is this your first time at camp? ___Yes ___No

SECTION TWO: Financial Information

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 will be issuing a limited amount of full scholarships. All other awards available will be based on needs and availability.

How much funding are you receiving from?

Personal Financing \$ _____
 Local Congregation \$ _____
 Other \$ _____

How much are you requesting from this Scholarship Committee?

\$ _____

Annual family income: (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

Name of Child/Youth _____

Are there any other campers attending the Christian Church in Florida Summer Camp Program from your household?

(check one) ___Yes ___No

If yes, please list their names: _____

Parent/Guardian Signature: _____

Date: _____

SECTION THREE: I want to go to Summer Camp...

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..." _____

SECTION FOUR: Church Endorsement

This section must be filled out completely by the SENIOR PASTOR, YOUTH DIRECTOR, CHILDREN'S DIRECTOR or CHURCH CONTACT PERSON. 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 (fill out Church Representative's name, Name of Church, Complete the Comment Section, and Sign). Please provide information that can 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 who receives scholarships, 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: _____

Please provide information that would help the Scholarship Committee is assessing the need level of this camper:

Signature: _____ Date: _____