SCHOLARSHIP APPLICATION

Mission Springs Christian Camps

Mission Springs has established a SCHOLARSHIP FUND for the purpose of providing financial assistance to those who would not otherwise be able to attend at Mission Springs sponsored program.

Gifts toward the SCHOLARSHIP FUND are received from many thoughtful individuals who recognize the valuable impact on a person's life that participation in a Mission Springs Camp experience can make.

Assistance is normally granted on a partial basis as need is determined. It is expected that each applicant will contribute towards the cost of the camp/conference to the extent of personal ability. Assistance towards travel expense is not available.

THE PROCESS: Complete an on-line registration for the conference or week of camp you will be attending, be sure to make an on-line deposit. Next, complete this form and return it to the Mission Springs Registrar. Once everything has been received and processed, you will be emailed with the approved scholarship amount.

NOTE: NO OTHER PROMOTIONS (Bring-a-Friend) CAN BE APPLIED WHEN A SCHOLARSHIP IS GRANTED

APPLICATION FOR SCHOLARSHIP

Name of Applicant (parent or guardian):		
Name of Camper:		
Address:	City:	Zip:
Church (If Any): City	y:	_
Program Registering For:	Dates:	_
Maximum amount you will be able to share in the co	ost: \$:	
Please state the circumstance making assistance ne	ecessary:	
Have you or a family member received financial assi	istance previously from Mission Springs? No	Yes
If yes what camp/conference?		
Signature of parent/guardian/sponsor	Relationship to camper	
Occupation or Position	Phone	
OFFICE USE ONLY Conference:	Register Online and make the your registration, and the campregistrar@	
Total Cost: % of granted scholarship	Mission Springs Camps ar	nd Conference Center Attn: Camp Registrar

Revised 10-15-18

1050 Lockhart Gulch Road Scotts Valley, CA 95066

www.missionsprings.com

Phone 831-335-9133 Fax 831-335-7726

\$ of Scholarship:

Approval Signature: