

Scholarship Request

Camp Michawana provides scholarships to families that are in need of financial assistance to send their children to a week of summer camp. The funds are limited so the request is limited to one child per family at 50% of the camper fees. Please check with your local church for financial assistance if more than one child needs assistance. You will be notified if approved by a confirmed camper packet. Please send in your registration and health forms along with this request.

Requestor Information

Name _____
Address _____ City _____
State ____ Zip _____ Phone _____ Email: _____
Number children in household? _____ Do you receive any agency support? _____

Child Camper Information

Name _____
Address if different _____
City _____ State _____ Zip _____
Phone _____

Relationship of requestor to child _____

Please describe the need for a camp scholarship:

Camp Michawana Contribution

If this is approved, Camp Michawana will scholarship up to \$150.00 of the camp fees. You must submit the registration and health forms along with this form to be able to have this request approved. Please send \$50.00 deposit with all the forms to Camp so we can complete the process in a timely manner.

Signature of requestor _____ Date _____