



Greetings!

As requested, please find a Campership Request Form below. It is the policy of Grotonwood to try to help any camper who needs financial assistance in order to attend camp. This policy was originally developed to assist underprivileged children from indigent areas; but as needs have increased, we have been able to expand our resources to assist others. The demand for financial aid is very strong and our resources are very limited; therefore, we ask that you check out all other resources prior to applying for our Campership funds.

Please know that we do not want to deny anyone the opportunity to come to camp. Therefore, we would ask that you research all possible means of funding camp (church, community organizations—Rotary, Lions Club, town/city hall, etc.). Should you still not be able to meet the camp fee please, by all means, apply below. **You are responsible for the deposit for your chosen session.** Your Campership award will be applied toward the balance due.

Sincerely,
Breeze Everitt, Director of Program

GROTONWOOD CAMBERSHIP REQUEST FORM

- ☐ Complete both sides of this form entirely
- ☐ Please email or mail this form to the camp office (address below)
- ☐ This form must be received more than 10 days before requested camp dates
- ☐ This is not an application for camp. Please register the camper and pay the registration fee by visiting www.grotonwood.org, or sending a check to the address below.
- ☐ For all campership requests, we encourage applicants to explore church and community resources before applying.

FOR OFFICE USE ONLY

Campership approved: \$.....

Date Registered:/...../.....

Approved by:

.....

Campers Name			Telephone	
Address				
Church Name				
Address				
Name of camp session for which Campership is being requested (for example, Breakaway)			Date	
AMOUNT OF CAMBERSHIP REQUESTED		INFORMATION NEEDED FOR CAMBERSHIP APPROVAL		
Total Fee (Including registration)	\$	Has the camper received any Camperships from Grotonwood or Oceanwod this year?	YES / NO	
Amount Family Will Pay	\$	If so please provide the following:	Amount \$..... Date...../...../.....	
Amount Church Will Pay	\$	Is the camper attending any other session at Grotonwood Oceanwood this summer?	YES / NO	
Amount.....Will Pay (Please specify who)	\$	Please explain your special circumstances to validate request on the next page		
Amount requested for Campership	\$			

The following information is necessary in determining Campership awards and is kept strictly confidential

List the total in household (children and adults)

List the MONTHLY income from each source:

First and Last Names

All wages, salaries or commissions before deductions and unemployment

Welfare
payments, child
support and / or
alimony

Pensions,
retirement,
social security,
workers
compensation
or disability.

Any other income

I certify that all of the information above is true, correct and that all income is reported.

Guardian (Please Print)

Signature

Date

Please explain your special circumstances to validate this request, failure to provide this will delay our ability to review your request.