

PRESBYTERY CAMPERSHIP FORM

Request for assistance from Presbytery:

Camper's Name _____ Gender _____

Address _____

Date of Birth ____/____/____ Number of years attending camp? _____

Grade Completed as of June 2010 _____

Name of Camp Session (example Try-It-Out) _____

Date of Session _____

Amount Requested \$ _____ From Presbytery Campership Fund \$ _____

Parent/Legal Guardian/s Signature _____ Date: _____

Church Name _____ Amount of Campership recommended \$ _____

Pastor/Christian Educator/Youth Minister Signature to certify
need _____ Date _____

CAMPERSHIP FUNDS ARE LIMITED TO THOSE IN NEED--PLEASE USE DISCRETION!