

Lake Ellen Camp  
212 Narrow Way  
Crystal Falls, Michigan, 49920  
(906) 542-3529

## SCHOLARSHIP REQUEST FORM

Lake Ellen Camp believes that every child should have an opportunity to go to camp. Finances should not prevent that from happening. This is the reason for the scholarship program.

**Please Note:** A scholarship request form must be filled out and approved before a scholarship can be given. Scholarships will be provided based on needs and funds available. We will only give scholarships for one session of camp per individual per summer. Scholarships will be applied once the registration/health form has been fully completed and sent in. SCHOLARSHIP CANNOT BE USED AS DEPOSIT.

I/We authorize the use of photos or videos taken of my child at camp for promotional purposes for Lake Ellen Camp and Christian Camp and Conference Association. **Please initial** (\_\_\_\_\_).

Full Name of Camper: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Age: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_ Male / Female

Camp Dates Registering for: \_\_\_\_\_ Program: \_\_\_\_\_

*(Scholarships available for one summer, fall or winter session) (see brochure or [www.lakeellencamp.org](http://www.lakeellencamp.org))*

Parent/Guardian's Name: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Many churches offer camp scholarships.

Have you approached your church regarding this possibility? Yes / No

Are you expecting or anticipating receipt of any other scholarships? Yes / No

If yes, how much and from whom? \_\_\_\_\_

References (Ideas would be your Pastor, Sunday School Teacher, Awana Leader, etc.)

Please include their address and phone number.

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

Reason for assistance needed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ How much can you afford to pay? \_\_\_\_\_

-----  
(For Office Use Only)

Scholarship approved for the following amount: \_\_\_\_\_ by: \_\_\_\_\_

Letter for **award** (or) **deferral** - sent: \_\_\_\_/\_\_\_\_ by: \_\_\_\_ Balance: \_\_\_\_\_ as of \_\_\_\_/\_\_\_\_