



SCHOLARSHIP APPLICATION

CAMPER & FAMILY INFORMATION

DATE OF REQUEST: _____

Camper Information:

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Has the camper previously attended Pine Brook Camp? Yes // No

Has the camper previously received a Pine Brook Camp scholarship? Yes // No

If so, when? _____ Amount Received: _____

Parent/Guardian Information:

Name: _____ Relationship: _____

Occupation: _____ Place of Employment: _____

Phone: _____ Email: _____

Name: _____ Relationship: _____

Occupation: _____ Place of Employment: _____

Phone: _____ Email: _____

FINANCIAL REQUEST:

Amount to be provided by church/organization: \$ _____

Amount to be provided by parents/guardians: \$ _____

Amount requested from Pine Brook Camp: \$ _____

