



225 Woodcrest Drive, Ephrata, PA 17522
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CAMPERSHIP FUND APPLICATION

BACKGROUND

The Woodcrest Retreat Campership Fund was established to provide financial assistance to campers who would otherwise be unable to attend camp. Each year there is an annual appeal to encourage friends of Woodcrest to help support the campership fund for the coming summer.

FUND RESTRICTIONS

1. As long as Campership Funds are available, funds will be granted based in part on the National School Lunch Program guidelines for eligibility and to persons who demonstrate the greatest financial need.
2. A Campership may only be applied to one session per camper per summer.
3. The Campership Fund does not cover the \$30.00 per child deposit fee.
4. After the deposit is paid, Campership Funds are awarded as partial or full camperships depending on the financial need.
5. Exception: If a parent, due to employment, needs to register their child for 3 or more weeks of day camp, they may be eligible to receive additional funds if available.

HOW TO APPLY

1. Complete the Campership Fund Application. Use one application per camper.
2. Mail this application along with a minimum non-refundable deposit of \$30.00 per child AND a registration form for each child to:

Woodcrest Retreat
Summer Camp
225 Woodcrest Dr.
Ephrata, PA 17522

3. We will notify you, as soon as possible, regarding the status of your campership. In the event, you are not granted a scholarship, and you choose not to attend for this reason, your deposit will be refunded to you.

(PLEASE COMPLETE APPLICATION ON SIDE 2)

CAMPERSHIP FUND APPLICATION (CONT.)

GENERAL INFORMATION

Camper Information

Camper Name: _____
 Birthday: _____
 Parent/Guardian: _____
 Name of Camp Session: _____
 Camp Dates: _____

Requestor Information (parent/guardian/agency)

Name: _____
 Relationship to Camper: _____
 Address: _____
 City, St. Zip: _____
 Phone: _____ Work/Cell Ph. _____
 Email: _____

CAMPERSHIP REQUEST

1. Total # living in household _____ Total GROSS HOUSEHOLD INCOME per year \$ _____

2. Is the camper connected with a particular church? ___ YES ___ NO
 Is the camper connected with a particular social service agency? ___ YES ___ NO

3. If "yes" to questions #2, please check with them to see if financial assistance is available.

4. Please share briefly the reason for the Campership request (family situation, unusual expenses, emergency crisis, job layoff, etc). Attach another page if needed.

5. Other than Woodcrest, have you received or will you apply for financial aid for this child to attend any other summer camps or similar programs this year? ___ Yes ___ No

6. _____ Parent/Guardian Signature _____ Date

REFERENCES

Please do not use immediate family members as references. If no church affiliation applies, provide a 2nd character reference.

Character Reference (someone to affirm financial need)

Full Name: _____
 Relationship to Camper Family _____
 E-mail: _____
 Phone: _____
 Work/Cell Phone: _____

Church Contact (if no affiliation, provide a 2nd reference)

Full Name: _____
 Church (or Relationship): _____
 E-mail: _____
 Phone: _____
 Work/Cell Phone _____

FOR OFFICE USE ONLY	Campership Rec'd	Registration Included	Amount Rec'd	Ck #	Application Accepted	Cost of Camp	Funds Awarded	Camper Name	Camp Name
		<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No				