

FAMILY SCHOLARSHIP APPLICATION

(Parent(s) plus children to make a total of at least 3 paid family members at camp.)

Parent Name(s) _____ Date _____

Address _____ Phone _____

City _____ State _____ Zip _____

Email: _____

Children who will be staying with parents and their age: _____

Children who will be staying with counselors and their age: _____

(Children who will be with counselors are eligible to apply for camper scholarships.)

Scholarships will be awarded as long as funds are available.

This fully completed form plus a \$100 deposit (\$50 non-refundable) is required to process your scholarship request and reserve space for you at camp.

Transportation to camp is not covered by a NWCCD scholarship and is the camper's responsibility.

If a scholarship is awarded, the family must provide the remaining fee.

There are no full NWCCD scholarships.

A NWCCD Family Scholarship pays up to \$100 per family.

Children staying with counselors are eligible to apply for separate camper scholarships.

There is a separate camper scholarship form. *Staff families are not eligible for a Family Scholarship.*

How did you find out about NWCCD Camp? _____

Have you been to NWCCD before? _____ yes _____ no How many years? _____

Include this form with your camper registration forms. They must be postmarked by May 1, 2010.

Mail to: NWCCD
PMB #369
17675 SW Farmington Road
Aloha, OR 97007-3296

Our email address: nwccd2010@yahoo.com

Our website: gmdeaf.org