

ADDITIONAL CAMBERSHIP SUPPORT APPLICATION

This form is to be completed only when a camper (or their family) seeks financial support above and beyond our stated level for normal campership support. Campership funds are to be granted “based on need” which may be different for families or individuals in a variety of situations. We seek only to help get you or your camper to the event of their choice while maintaining funds and options for others as well.

I. Personal Information:

Name _____ Camper Name *(if different from applicant)* _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

My local church name (if a member or affiliated) _____

Pastor _____ Phone _____

II. Camp Information

I am attending Camp # _____ Camp Title _____

Camp Location _____ Dates _____

III. Campership Request

- I receive government or program assistance through _____ (County or program). Please note that this does not affect your campership status. Some counties and programs offer camp money and we will help you receive these funds.

Campership Options - Please check all that apply

- General Campership Fund** – Need based camperships for United Methodist members.
- Religion and Race Campership Fund** – Need based camperships for campers of the following ethnic groups: African-American, Asian, Hispanic, and Native-American
- Our Future Kids in Camp Fund** – Special outreach camperships for youth & families not connected to a church
- Star Lake Endowment Fund** – Need based camperships for campers attending Star Lake Wilderness Camp.

Total Cost of Camp Event:		\$
<i>Sources of Income Available to Me</i>	Personal Funds:	- \$
	My Local Church Support:	- \$
	Other Sources:	- \$
Balance Needed:		= \$

IV. Please Complete the Following Questions to the best of your ability and sign at the bottom of the page. Your privacy in this matter is important and we will do all we can to maintain that integrity.

1) Please briefly explain your reason for this additional request for funds in support of the above camper.

2) Is this the only camp/retreat event this camper will attend this calendar year? **YES** **NO**

If not, please share the other camp/retreat events this camper has or will attend, if you have received a campership grant, and how much that campership grant was for.

Do you hope to attend any other camps? Will you need campership support for this as well?

3) Please share briefly what your local church or other resource agency is doing to help you, or what you have attempted to use as a resource.

4) Please list a reference (not family) who we can contact who would have some knowledge of your situation. Suggestions are your church pastor, secretary, youth worker, Sunday school teacher, school teacher, scout leader or other such person.

Reference Name: _____

Daytime Phone: _____

I give approval to contact the reference listed above.

Signature _____ **Date** _____

Please allow enough time for this request to be approved prior to your camp experience. You will be notified as soon as is possible. You should consider advising the persons you selected as references of this request in advance, to help move things along.

Our hope and prayer is that this experience will be possible for you/your camper and that it will be very positive and life-changing.

God's blessings,
Retreats and Camping Ministry Team

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