



Scholarship Application

Scholarships are available because of generous donations designated to assist individual campers who have a need. You may request assistance for yourself **or** on behalf of another camper. **Please complete 1 form per camper.** Campers must be registered for camp before applying for a scholarship. *This application must be turned in at least 2 weeks before arrival.* Your church will be notified of scholarships awarded. Our Scholarship Committee will review applications weekly. If you have questions, please contact the office at 479-250-1865.

Church Name: _____ City: _____

Camper Name: _____

Camper Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ E-mail: _____

Step 1: In the space below please explain circumstances which help us understand the reason for the camper's need:

Occasionally we use excerpts from these applications to help raise funds for our scholarship program. Please note: No identifying details are shared with donors. Please check here if you do not want excerpts from your application used for fund raising purposes.

Step 2
Tell us how much you are requesting
\$ _____

Step 3
For which event are you requesting a scholarship?

What is the date that you will arrive?

Step 4
Please make sure you are registered, then email, fax or mail this application to:

Camp Siloam
3600 S. Lincoln St.
Siloam Springs, AR 72761
Fax 479-250-1864
e-mail: scholarships@campsiloam.com
www.campsiloam.com

For Office Use Only
Scholarship Approved by Camp Siloam Staff:

Date: _____ / _____ / _____
Amount: \$ _____
Church email: _____ Family Call: _____