

2018 Campership Application

Thanks to annual donations from Calvin Crest's supporters, we are able to offer partial scholarships, "Camperships," to those who would otherwise not be able to attend camp. Camperships are awarded in 30%, 50%, or 70% amounts or by requested dollar amount based on financial need and/or special circumstance. 100% camperships are not available. We encourage you to partner with your local church if you require additional assistance. Please note, if a camper is attending multiple camp sessions, a partial campership can be applied to only one camp session. Camperships cannot be combined with any other discount.

If you have any questions please call our office at (559) 683-4450 or email calvinreg@calvincrest.com.

To apply:

- 1. Please fill out the enclosed **Campership Application** thoroughly. If applying for a campership based on income, you must fill out the "yearly household income" section. Camperships cannot be awarded without this information. If applying for a campership based on special circumstance, please include a detailed description of your circumstance.
- 2. If attending with a church, return the application to your church Registrar, Youth Pastor, or Pastor to complete and return to Calvin Crest along with your completed registration form or online registration.
- 3. If attending as an individual, return Campership Application via mail, fax, or email.

Mail To:

Calvin Crest Conferences Attn: Registrar 45800 Calvin Crest Road Oakhurst, CA 93644

Fax To: (559) 683-7118

Email To: calvinreg@calvincrest.com



2018 Campership Application

Camper Name (First & Last)		Camp Session Name and Dates			
Address			Apt #		
City		State		Zip	
Parent/Guardian Name (First & Last)		Email			
Primary Phone		Secondary Phone			
		1			
Please provide a description of the financial need or other spec	cial circumstance:				
PLEASE NOTE Camperships are awarded in 30%, 50%, or 7 requested. 100% camperships are not available. We encourage If you have a specific dollar amount to request, please list it he \$	you to partner with				mount is
Has the camper been to Calvin Crest before? (Circle One) YES/NO		"Yes," please list year and what camp they attended:			
Total # in Household:	al Yearly Household Income (Household Income (Parents/Guardians Combined Income):			
Parent/Guardian Signature			Date		
Church Affiliation (IF NONE STOP HERE)					
Church Name					
Address	ity	State Zip			
Church Phone	Church Fax				
Will the Church be providing financial Assistance? (Circle One) YES/NO		If "Yes" what is the amount?			
Name of the person at the church who is authorizing that amou	unt:				
Registrar/Pastor Name (Print)	ignature		Date		
Registrar/Pastor Phone	Registrar/Pastor Fmail				

Thank you for your application.

You will receive an email detailing campership receipt and the awarded amount within two weeks of receiving your application.

Please verify that the email above is accurate.