SUMMER CAMP

JACK AND DONNA CAMPBELL SCHOLARSHIP



The Campbell family is committed to partnering with Glen Lake Camp & Retreat Center and individual camper families to provide financial assistance for those campers unable to contribute to summer camp registration fees. The partnership is an opportunity for campers to seek adventure, community, and a life in Christ through the week-long summer camp experience at Glen Lake Camp.

| CAMPER INFORMATION | |
|--|--|
| | |
| Camper Name | Camper Street Address |
| Parent/Guardian Name | City, State, Zip |
| Parent/Guardian Phone Number | Camp/Session |
| PARENT/GUARDIAN COMMITMENT | |
| Please answer the following questions: 1) Has your child ever attended a summer camp? If yes, when and where | |
| Camp's summer camp program; however, our f | is my/our desire for my/our child to participate in Glen Lake financial resources are limited, needed for basic needs, and ship. I/we understand that submission of this application |
| Parent/Guardian Signature | |
| CAMPER COMMITMENT | |
| Have your camper complete the following information: What activities would you be interested in at camp: Canoeing/Kayaking Hiking Archery Swimming Arts and Crafts | |
| What excites you most about the summer camp experience Making new friends Being outdoors in nature Trying new adventures | ce at Glen Lake: |