



Dear Parent(s),

Below is a list of everything you will need to apply for a scholarship for your child(ren). Please make sure you have everything on this list before you turn in your application to the camp office. Incomplete applications can result in delays and cause you to lose a space in camp.

- ☐ The completed Camper Application
- ☐ The completed Scholarship Application
- ☐ A registration fee of \$25 per camper for Day Camp or \$50 for Overnight Camp
(note: payment will be returned if we are unable to award a scholarship)

Please know that we generally do not award more than one session of camp per child. If you are able to pay for a session of camp, please let the scholarship money go to those who cannot pay. The mission of the scholarship fund is to provide a camp experience for campers who otherwise would not be able to come at all.

Currently we offer scholarships to those with the greatest financial need based on how many children are in their family and household income. Please feel free to contact us if you have any further questions. In order to help the funds go further we also may offer a partial scholarship or work out a payment plan to help your family afford camp.

Thank you for choosing Camp Sunshine!

Sincerely,

Jeff and Trisha Keiser



camp sunshine

camper scholarship application

Your Name: _____ Date: _____

Family Street Address: _____ State: _____ Zip: _____

City: _____ Work Phone #: _____

Cell Phone #: _____ Spouse's Name: _____

Marital Status: Married Divorced Widowed Single Separated

Top Camp Session Choices:

Child(ren)'s name(s) and grade entering in the fall.

1. _____ 3. _____ 1. _____

2. _____ 4. _____ 2. _____

Do you attend a church in Lincoln? Yes No If so, where?

If so, have you looked into camp scholarships through your church? Yes No

Do you have family that would be able to help financially for camp? Yes No

Employment Income Information:

Your Employer: _____ Spouse's Employer: _____

Address: _____ Address: _____

Position _____ Position: _____

Annual Salary: _____ Annual Salary: _____

Other Monthly Income:

Unemployment: _____ Alimony: _____

Child Support: _____ Disability: _____

Food Stamps: _____ Housing: _____

Public Aid: _____ Other: _____

Approximate Monthly Expenses:

Housing: \$ _____ Insurances: \$ _____

Vehicles: \$ _____ Education: \$ _____

Food: \$ _____ Debts: \$ _____

Utilities: \$ _____ Other Expenses: \$ _____

Approximate TOTAL Monthly Expenses: \$ _____

Are there any special financial considerations or circumstances that make affording camp expenses difficult? Please be specific (use additional pages if needed).
