



Southern Hills District
 East Ohio Conference
 United Methodist Church

Camp Scholarship Request

PO Box 340, Cambridge, OH 43725
 Phone 740-255-5691 Fax 740-255-5693
shillsdistrict@gmail.com

Church Name: _____

CAMPER NAME	CAMPER CODE, NAME AND DATE	CAMP COST	SCHOLARSHIP REQUESTED
	<p>(Southern Hills District can usually fund \$75 per camper.)</p> <p>Total cost of camp</p> <p>Minus amount to be paid by church</p> <p>Minus amount to be paid by camper</p>		
		TOTAL SCHOLARSHIP REQUEST	

I recommend that these persons receive scholarships to assist with the expense of camp.
 We have requested funding from the church and where possible done fund raising to help cover the cost.

_____ PASTOR SIGNATURE _____ DATE