

United Church of Underhill



Application for a Scholarship To Overnight Summer Camp

Camper's Name:

Address: _____

Home Telephone Number: _____

Email Address: _____

Parent Name: _____

Age: _____ Current School Grade: _____

Briefly describe what camp you would like to attend and why:

Applications due by May 15, 2015

Please return completed application to: **Missions Ministry, United Church of Underhill, P.O. Box 265, Underhill, VT 04589-0265** or e-mail to a Missions Ministry Member.

Mission Ministry Use Only

Date received: _____ Scholarship amount awarded: _____