



Lutheridge+Lutherock Ministries, Inc.  
 Scholarship Office:  
 2049 Upper Laurel Drive  
 Arden, NC 28704  
 (828) 684-2361, fax: (828) 687-1600

**Scholarship Application**

**IMPORTANT INFORMATION – PLEASE READ:** It is the intent of Lutheridge + Lutherock Ministries, Inc. (LLMI) that money not be the sole reason a person does not come to camp. Through the generosity of donors, LLMI is able to offer needs-based partial scholarship assistance. Everyone, who otherwise could not afford to come to camp, is welcome to apply for a partial scholarship. In an effort to help as many people as possible, it is our hope that we achieve a partnership between the family, home church and camp. Please return completed form to the Scholarship Office above. **Please note: if a camper's registration has already been paid in full, scholarship funds cannot be used as a form of reimbursement.**

Date: \_\_\_\_\_ Camper/Participant's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_  
 (or name & relationship of person requesting scholarship)

Address: \_\_\_\_\_  
 (where award letter should be sent)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Full cost of program: \$ \_\_\_\_\_  
 Family/friends can provide: \$ \_\_\_\_\_  
 Congregation/agency can provide: \$ \_\_\_\_\_ (leave blank if not requesting church/agency funding)  
 Amt. requested in scholarship from LLMI (cannot be full): \$ \_\_\_\_\_

**FOR OFFICE USE ONLY**  
 Date recv'd \_\_\_\_\_  
 Cost of program \_\_\_\_\_  
 Deposit recv'd \_\_\_\_\_  
 Scholarship award \_\_\_\_\_

Home Church/Agency: \_\_\_\_\_ City/State: \_\_\_\_\_

Printed Name of Pastor/Church Council Pres./Agency Rep.: \_\_\_\_\_

Contact number(s): \_\_\_\_\_

Signature of Pastor/Church Council Pres./Agency Rep.: \_\_\_\_\_  
 (Required if scholarship request exceeds 1/4 of the total cost of the program)

Check one: Youth Participant \_\_\_\_ (Grade just completed: \_\_\_\_ ) OR Adult Participant: \_\_\_\_

Has participant already registered? \*\*\* \_\_ Yes \_\_ No Which site? Check one: \_\_ Lutheridge \_\_ Lutherock

Name & date of program: \_\_\_\_\_  
 \*\*\*Please note that this scholarship application does not serve as a registration for camp nor will it save your spot in a specific program.

Brief description of circumstances (use back of form if more space is needed):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_