

POLICY: First Lutheran Campership Program

GOAL: To provide financial assistance to youth and families who are unable to pay fees associated with FLC related camps and activities.

SOURCE OF FUNDS: Youth fundraising activities, general member donations, other FLC organization donations i.e.) FLCW

RECEIPT OF CAMPERSHIP CRITERIA:

1. Family need
2. Youth's participation in fund-raising activities
3. Youth's participation in FLC youth activities such as confirmation, LT, Fish Force, or X-Factor
4. Funds available for distribution

CAMPERSHIP APPLICATION PROCESS:

1. Campership form must be completed and submitted to FLC youth directors at least 2 weeks prior to the event.
2. Decision made by FLC youth directors, with input from pastoral staff and Board of Youth as requested by youth directors.
3. Campership requests not submitted on the proper form will not be considered.
4. Parents requesting camperships for more than 1 child must complete a form for each child.

Camperships cannot be transferred to another youth or transferred to another program than the one originally applied.

Camperships not used by the individual are forfeited and returned to the FLC campership fund.

3/09 BOY

FIRST LUTHERAN CHURCH
YOUTH CAMPERSHIP APPLICATION

Youth Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Phone (home) _____ (cell) _____

Parent/Guardian Name _____

Address (if different) _____

City _____ State _____ Zip _____

Phone (home) _____ (Cell) _____

Name and date of Event or Activity: _____

Date of application: _____

Cost of Event \$ _____

Participant contribution \$ _____

Fundraising contribution \$ _____

Amount of campership request \$ _____

Briefly explain your need for campership assistance:

I understand that this application in no way guarantees a campership award. I further understand that First Lutheran Church awards partial camperships with the expectation that youth can earn part of their fee by participating in youth fundraising events.

Parent/Guardian Signature _____

Youth Signature _____

This application should be returned to the FLC Youth Directors two weeks before the event for which funds are requested.

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For FLC use only:

Youth Applicant's name _____

Date application received in office _____

Youth participation _____

Fund raising account _____

Request granted/denied _____

Date _____

Signature _____