

PCCCI CAMBERSHIP REQUESTS:

1. Name(s) of camper(s) and location of camp attending:

2. Name and relationship of person filling out request if different.

3. Give a brief description of applicant's financial need, or other reason for requesting a campership.

If you are not affiliated with a church SKIP TO #9, those with a church affiliation please fill out 5-8.

5. Name of church

6. Give a brief description of applicant's history with the church's youth/children's program. OR, are they a participant in an outreach program of your church?

7. Is the church going to help financially?

8. Do you (the youth director/registrar/other) recommend this person as deserving of a campership? (N/A if being filled out by applicant).

THANK YOU FOR YOUR TIME. WE WILL RESPOND TO YOUR REQUEST EITHER BY TELEPHONE OR IN WRITING AS SOON AS POSSIBLE

9. PCCCI should reply to:
Name: _____ Phone Number (____) _____
Address: _____

Email address: _____