SC United Methodist Camps Retreat Ministries
516 Piedmont Rd
Easley, SC 29642
www.sccarm.org
864.298.0125

# *Summer Camp Scholarship Application*

***We, at SC United Methodist Camps and Retreat Ministries, along with our donors, are excited to help make it possible for your camper to attend camp. To apply, please complete their registration on-line at www.asburyhills.org and pay the initial $50.00 registration fee to hold their spot in their preferred camp session. Complete the scholarship form as directed on the form with the amount requested. We do require the signature of your minister or social worker but we do not require your church to make a contribution toward your campers session cost if they are not able to do so.***
***Generally, we contribute ½ of session cost as an initial scholarship contribution. If more than ½ is requested, we will evaluate those requests as needed.***
***Scholarship forms may be summited one of the following three ways:***
***Email to: account@sccarm.org or Fax to: (864) 298-0051 or Mail to: SC Camps and Retreat Ministries, 5 Century Drive, Suite 250, Greenville, SC 29607***

**Applicants (Camper) Name: _____**

**Camp Session Registered to Attend: _____Date: _____**

**Session Cost: $_____ Amount Requested: $_____**

**Parent's Name(s): _____**

**Address: _____**

**City: _____ State: _____ Zip Code: _____**

**Phone Number: _____ Email: _____**

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***CONFIRMATION OF NEED*: (*Camp Scholarship application will not be processed without completion of this section*)**
My signature below confirms my relationship to the applicant and my awareness of need.

**Minister or State Social Worker Name: _____**
**(Circle One)** **(Please Print)**

**Briefly Describe Need: _____**

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**Signed: _____ Date: _____ Phone: _____**

My organization or sponsor is able to contribute $_____, to be placed alongside the camp scholarship awarded by SC Camps and Retreat Ministries, insuring that the applicant will experience the joy of camp this summer.

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***CAMP SCHOLARSHIP REQUIREMENTS:***

- ***Confirmation of need from a minister or social worker familiar with the camper and family is required.***
- ***Registration & $50 minimum deposit per camper is required.***
- ***Balance of camp fee not covered by the camp scholarship is due two weeks prior to camp attendance.***
- ***Cancellation, no show, and other fee policies contained in the information portion of the registration form apply.***
- ***This program exists to make it possible for children and youth to come to camp. If you have concerns or difficulty with any part of the camp scholarship process, please contact us.***

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I want my child to enjoy the benefits of the summer camp experience.
My signature below confirms the accuracy of the information I have provided and confirms my understanding of the conditions of scholarship awards.

**Parent / Guardian Signature: _____ Date: _____**

NOTE: Camp Scholarships are restricted to 1 week sessions