

SUMMER CAMP FINANCIAL ASSISTANCE APPLICATION

A fund is in place to receive donations to help students with a financial need attend camp. To request financial assistance, complete this Camp Financial Assistance Application and submit to Ohio Kidmin by **May 1, 2019**.



All financial assistance is granted based on the availability of funds and consideration of the financial need of the each applicant. Pastors referring a student for financial assistance will be notified vial email if the application is accepted. The financial assistance is typically \$50 per applicant, but the amount may be higher based on the availability of funds.

Application Process:

1. A parent and student should complete sections 1-4, and sign the designated signature lines in section 6.
 2. A pastor (Kids Pastor or Lead Pastor) should complete sections 5, and sign the designated signature lines in.
 3. The pastor should mail the application to Ohio Kidmin, 8405 Pulsar Place, Columbus, OH 43240
- The application can also be emailed to OKM@ohioministry.net

The information provided on this application is considered confidential and will only be shared with the Financial Assistance Committee.

1. STUDENTS INFORMATION

Name _____ Birthdate ____/____/____ Grade _____
(2018/2019 school year)

Address _____

Has this student attended OKM camps before? If yes, what years? _____

Which Summer Camp would the student like to attend? Kids Camp Starter Camp

2. PARENT/GUARDIAN INFORMATION

Parent/Guardian 1

Name _____ Occupation _____

Home Phone _____ Cell Phone _____

Address _____

Parent/Guardian 2 (optional)

Name _____ Occupation _____

Home Phone _____ Cell Phone _____

Address _____

3. REFERENCE INFORMATION

Name of Reference _____ Relationship to Applicant _____

Email Address _____ Phone Number _____

4. CHURCH INFORMATION

Church Name _____ Church City _____
Church Office Phone Number _____
Lead Pastor's Name _____ Lead Pastor's Email _____
Lead Pastor's Phone Number _____
Kid's Leader's Name _____ Kid's Leader's Email _____
Kid's Pastor/Leader's Phone _____

5. TO BE COMPLETED BY A PASTOR (Lead Pastor or Kids Pastor)

Please explain why you recommend this applicant for a Summer Camp scholarship:

In what ways is your church assisting with the Summer Camp registration fee? (Fundraisers, special offering, designated funds, etc.)

*If you have any hesitation in recommending the applicant for financial assistance, please contact the Ohio Youth Ministries office at okm@ohioministry.net.

6. SIGNATURES

I hereby certify that the above statements are true and correct to the best of my knowledge. I understand that a false statement may disqualify the applicant for benefits.

Parent Signature _____ Print Name _____ Date _____

Lead Pastor Signature _____ Print Name _____ Date _____

Kids Pastor/Leader Signature _____ Print Name _____ Date _____
(optional)