Montrose Bible Conference CAMP SCHOLARSHIP APPLICATION

Montrose Bible Conference is pleased to be able to offer limited scholarship assistance for children and youth participating in camp. As the Lord continues to work in many campers to bring them into a relationship with Him, we desire to see all youth have opportunity to take part in what may be the most significant time in their lives. We desire for everyone who wants to come to camp to be able to do so.

We also recommend you contacting your local church about any scholarship assistance your church may have.

Steps for completing the Application Process:

- · Send application to: Montrose Bible Conference, 218 Locust Street, Montrose, PA 18801 or Fax: 570-278-3061 or Email: mbc@MontroseBible.org
- \cdot Applicants accepted for assistance will receive notice that states your application has been accepted and the amount of assistance.
- · All applicants will be notified concerning the scholarship decision.

Camper's Name	Birth date (M/D/Y)	
Street Address/City/State/Zip Cod	le	
() Home Phone Number	Date planning to attend	
Name of Local Church/City		
How often do you attend? □ wee	kly monthly other	
Father/Male Guardian Informa	tion:	
	()_	
Name	Phone Number	
Street Address/City/State/Zip Coo	le (if different than above)	
Occupation	Email	

Mother/Female Guardian Information: Name Phone Number Street Address/City/State/Zip Code (if different than above) Occupation Email **Scholarship Information:** Annual Household Income: ______ Number of Persons in Household: ______ Scholarship amount requested from Montrose Bible Conference? Have you attended Montrose Bible Conference before? Yes / No (please circle one) Will there be other children from your family attending? Yes / No (please circle one) If yes, how many children? _____Which camp?____ If given financial scholarship assistance from Montrose Bible Conference, would you be willing to submit in writing or email a brief description of your experience at Montrose Bible Conference within two weeks after the camp? \Box yes Please share briefly with us any information, either personal or financial, that will help us respond wisely to your request: Signature of Parent/Legal Guardian

Date