

North Central Camp Cherith
Scholarship Application

Camper Name _____

Amount needed (We offer partial scholarships only) _____

Parent/Guardian Name _____

Phone _____

Email address _____

Briefly state the reason for your request:

Spiritual Reference:

Pastor's Name _____

Phone _____

Email address _____

Personal Reference:

Name _____

Phone _____

Email address _____

Send this application along with your registration form and the required \$100.00 registration fee (if not submitted already) to the camp registrar:

Gerri Wilson
17 S 1st S. A1503
Minneapolis, MN 55401

This application will be processed when the registration fee is paid or other arrangements have been made with the registrar. If you have any questions, please contact the registrar at wilsongerri@aol.com or 612-991-3124.