



**Metochos Ministries Lutheran Bible Camp Association**

**Campership Application Form**

*Each year Metochos Ministries collects funds for campers who cannot afford the full cost of attending camp. To apply, please fill in this form and return it to the camp office.*

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Camper's Name: \_\_\_\_\_

Camp Applying to Attend: \_\_\_\_\_

Camp Dates: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Congregation Name/City: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

I recommend the above camper to receive a Campership grant this year.

Pastor's signature: \_\_\_\_\_

Please give a short description of how you qualify for a Campership.

I wish to apply for financial assistance to send the above camper to camp this summer: Signed:

\_\_\_\_\_

If you can, on the reverse side please provide an account of a few of your most memorable experiences at camp in the past. These may be used for promotional purposes of Metochos Ministries.



c/o Trinity Lutheran Church

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