

Camp Allen Ministries Gunnels-Winberry Scholarship Application

PLEASE

ATTACH

РНОТО

| Name: | | Age: | Date of Birth: | |
|------------------------|---|---|--|--------------------------------|
| Mailing Add | ress: | | Phone #: (|) |
| City: | | State: | | Zip: |
| Email Address: | | Parents/Guardian | s Names: | |
| Church Attending: _ | | | Phone #: (|) |
| Address: | City | y: | State: | Zip: |
| Senior Pastor's Name | :: | Phone #: () | Email Address: _ | |
| Youth Pastor's Name | : | Phone #: () | Email Address: | |
| Church Cam | p Attending: (Check one) | Senior High | Junior High Ju | nior 1 Junior 2 |
| Pastor or Youth Pasto | or Comments (Required) | | | |
| | | | | |
| | on for applying for this scholar | | | |
| - | eceiving financial help toward | • | • | |
| If YES , please | e specify the dollar amount yo | ou will be receiving from | other sources. Amount: \$_ | |
| Application [| Deadlines: Senior High | & Junior High is May 5 th | Junior 1 & Junior 2 | is June 5 th |
| Applic | ant will be notified, if approve | ed, two weeks after the | application deadline for eac | h camp. |
| Date:/ | '/ | Applicant's Signa | ture: | |
| | Gunnels-Winberry Committee | e – Bonnie Winberry, W | ade Matthews and Rick & So | nya Gunnels |
| | se send your application to: Rick & Sonya Gunnels 412 Howland Drive Dexter, MO 63841 (573) 624-6015 | | OFFICE USE O: Accepted Rejected Voucher Ser Amt: Date: / / | at |